

DBA Name	NA			Le	egal Name	X L Flo	ors, Inc				
Type of Business subconta		bcontactor Floooring		T	Tax ID		6767		Corp		
Full Business Address 902 7th Ave. East, Hendersonville, NC 28792											
Full Billing Address											
Phone at Location (828) 329-8096				Best Phone (82	8) 329-809	96 Fax					
Business Email aczip425@gn		o425@gma	nail.com		Website	NA					
Years In Business	7	7 Average		icket		Gross A	ross Annual Sales <u>-400,000,750,000.00</u>		0.00		
Do you currently h	ave cash advan	ce?	No	With who? _			Ва	lance			
Current Credit Card Processor					Averag	e Processii	ng Volume				
Last Month Vol.		#of Tic	kets _		2nd Month Vol		#of	Tickets			
3rd Month Vol.		#of Tic	kets _		4th Month Vol	•	#of	Tickets			
Owner #1 Name	Alexander Czipu	lis		Title	Owner						
Date of Birth	04-25-1945			SSN 262-70-43		4381					
Full Home Address	504 Lakeland Drive Pisgah Forest, NC 28768										
Home Phone	(828) 329-8096	Cell	Phone	(828) 329-8	8096 Email		aczip425@gmail	.com			
Own/Rent	\$ 0 Own	Yea	rs There	3 D	rivers Lience #	000028637	817 State	NC			
Owner #2 Name				Title							
Date of Birth				SSN							
Full Home Address											
Home Phone	Cell Phone			Email		-					
Own/Rent	\$	Yea	rs There	D	rivers Lience #		State		-		
Business Home Based? No Location: Lease/Own Owned Lease Term Monthly Rent											
Landlord / Mortgage Co. Boyd Hyder					Со	ntact	Matt Co	oke			
Contact Phone	(828) 808	-9896	Cell			Email	mcooke@	mountainproperty	mgt.com		
Bank Name/Branch	United Commun	ity Bank	Contact	Vickie Balso	m	Phone	(828) 698-568	4			
Trade Reference#1	Fishman Flooring Solutuon	g	Contact	Dan		Phone	(828) 254-373	8			
Trade Reference#2	Daltile		Contact	Brian Beach	am	Phone	(828) 654-797	9	•		
Trade Reference#3	Interface Carpet		Contact	James Lanie	!r	Phone	(336) 749-130	4	· 		

I hereby represent that all the above information is true and understand that making false statements might be considered fraud. By providing the above information, the applicant(s) authorize you to whom this application is made or your agents to investigate my/our financial responsibility and credit worthiness, specifically principal and corporate entities, and will provide financial statements, tax returns, etc. as you deem necessary. A photocopy of this authorization will be deemed as acceptable for release of credit information. I/We authorize Money Works Direct, Inc. to receive pertinet information regarding the commercial lease for the above referenced location from my leasing company and or agent. I/We authorize you to update my/our credit profile from time to time in the future, as you deem appropriate. By signing below, each of the aboe listed business and business ownet/officer (individually and collectiverly, "you") authorize Money Works Direct and each of its representatives, successors, assigns and designees ("Recipients") that may be involved with or acquire commercial loans having daily repayment features or purchases of future receivables including Merchant Cash Advance transcation, including without limitation the application therefor (collectively, "Transcation") to obtain consumer or personal, business and investigative reports and other information about you, including credit card processor statements and bank statements, from one or more consumer reporting agencies, such as TransUnion, Experian and Equifax, and from other credit bureaus, banks, creditors and other third parties. You also authorize Money Works Direct to transmit this application form, along with any of the foregoing information obtained in connection with this application, to any or all of the Recipients for the foregoing purposes. You also consent to the release, by any creditor or financial institution, of any information relating to any of you, to Money Works Direct and to each of the Recipients, on its own behalf.

Signature#1	Printed Name	Alexander Czipulis	Date	08/15/2019
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