MoneyWorks >	ADMINISTRATIVE FORM PLEASE FAX TO:1.646.417.5809 Sales Rep: Kyle
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DBA Name		Green N			Le	gal Name	2	Green	Brick Med	ia			
		commerce		Tax ID		81-2152762				LLC			
Full Business Addre	SS		ain St STE STE 10	0 Buffal									
Full Billing Address					-,								
Phone at Location	(407) 504-9499				Best Phone			Fax					
Business Email		contact@greenbrick-media.co		dia.com	om Website								
Years In Business		1 Average Tick		e Ticket	 et		Gross Annual Sales <u>1,500,000.00</u>			.00			
Do you currently ha	ave cash a	advance?	No	With	h who? _					Balar	nce		
Current Credit Card	l Processo	or				. A	verage	Processi	ng Volum	e			
Last Month Vol.			#of Tickets			2nd Mon	th Vol.			#of Ti	ckets		
3rd Month Vol.			#of Tickets			4th Mon	th Vol.			#of Ti	ckets		
Owner #1 Name	Green Bri				Title		E0						
Date of Birth	05/06/198			2505	SSN		92-84-33	.08					
Full Home Address			Apt.2 Tampa, FL 3	3606									
Home Phone	(407) 509	)-9499 ———	Cell Phone				mail		contact@g				
Own/Rent	\$ 0 Rent	<u> </u>	Years There	1 year	rDr	rivers Lien	ce # <u>L1</u>	163-178-8	39-166-0	State	Florida	<del></del>	
O #2 No					T:41 -								
Owner #2 Name  Date of Birth					Title SSN	_							
Full Home Address					SSIN	_							
Home Phone			Cell Phone			Er	mail						
Own/Rent	\$		Years There		nd.	rivers Lien	ce #			State			
			_										
Business Home Bas	ed?	Yes	Location: Lease/	Own	Leased	Lea	ase Terr	m		Month	ly Rent	3,400.0	0
Landlord / Mortgage	e Co						Conta	ict					
Contact Phone				Cell				<u> </u>	Email				
Bank Name/Branch			Con	tact				Pho	one				
Trade Reference#1			Con	tact				— Pho	one				
Trade Reference#2	-		Con	tact				— Pho	one				
Trade Reference#3			Con	tact _				— Pho	one				

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 Translution, 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	Green Brick LLC	Date	12/12/2016