Money	/Works	ADMINISTRATIVE FORM PLEASE FAX TO:1.646.417.5809 Sales Rep: Luciano

DBA Name	Dec	cca Consulting	UIC .	1.0	agal Namo		Decca	Consult	ing LLC		
Type of Business		Decca Consulting LLC IT Staffing		Legal Name Tax ID		Decca Consulting LLC 260415339				LLC	
Full Business Address		02 Langdon C	<u> </u>	1	ax ID		20041	.5559			LLC
Full Billing Address	3 203	oz Languon C	L								
Phone at Location	— (83	2) 561-0634			Best Phone	<u> </u>			Fax	(832)	201-7233
Business Email		amin@deccaconsulting.com			Website		www.deccaconsulting.com				
Years In Business				T:-1+			Gross Annual Sale			1,100,000	00
			_								
Current Credit Card Processor Average Processing Volume											
Last Month Vol.		#of Tick	ets		2nd Mont	h Vol.			#of	Tickets	
3rd Month Vol.		_ #of Tick	ets		4th Mont	h Vol.			#of	Tickets	
_	Nayeem Amin			Title		naing F					
_	09251981			SSN	59	5-61-45	549				
_	26302 Langdo										
Home Phone ((832) 561-063	4 Cell P	hone -		Em	nail		amin@d	eccacons	sulting.om	
Own/Rent	\$ <u>0 Own</u>	Years	There 5	D	rivers Lienc	e # <u>2</u>	3586323		_State	TX	
Owner #2 Name				Title							
Date of Birth				SSN	_						
Full Home Address Home Phone		Cell P	hono		Em	nail					
Own/Rent	.		There		rivers Lienc				State		
Own/Rent	\$				rivers Lienc						
Business Home Base	d? No	Location	: Lease/Own	Leased	Lea	se Teri	m <u>12</u>	2	Mon	thly Rent	265.00
Landlord / Mortgage	Co. Regus					Conta	act	_			
Contact Phone			_ Cell					Email			
Bank Name/Branch	Chase Bank		Contact				Ph	one			
Trade Reference#1	First Genesis	5	Contact	Pascal V	Vatty		— Ph	one _	(281) 27	76-0501	
Trade Reference#2			Contact				 Ph	one			
Trade Reference#3			- Contact -				 Ph	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 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	Nayeem Amin	Date	04/17/2017