DBA Name	Zoom Blo	Zoom Bloomz		Legal Name		Zoom Bloomz	
Type of Business Florist			Tax ID		Zoom Bloomz		LLC
Full Business Addre	ess 2600 ne 2	avenue Miami,fl 3313	37				
Full Billing Address							
Phone at Location (305) 330-5477		Best Phone (786) 3		357-9320	Fax		
Business Email	zoombloomzmidtown@gmail.		com Website		Www.zoombloomz.com		
Years In Business	1	Average Tick	et		Gross Annual	Sales <u>150,000.0</u>	00
Do you currently h	ave cash advance?	Yes W	ith who? Squa	ire		Balance 7700	
Current Credit Card	d Processor			Average F	Processing Volu	ume	
Last Month Vol.		#of Tickets	2nd	d Month Vol.		#of Tickets	
3rd Month Vol.		#of Tickets	4th	n Month Vol.		#of Tickets	
Owner #1 Name	Tawnie Aguilar		Title	Owner/man	ager		
Date of Birth	08-11-1976	-11-1976		SSN 151-64-2551			
Full Home Address	161 ne 26 st miami fl	33137					
Home Phone	(786) 357-9320	Cell Phone	(786) 357-9320	Email	zoomb	loomzmidtown@gmail.	com
Own/Rent	\$ 0 Rent	Years There 2.5	Driver	rs Lience # A2	46800767910	StateFl	
. "			<del></del>				
Owner #2 Name  Date of Birth			Title SSN				
Full Home Address			33N				
Home Phone		Cell Phone		Email			
Own/Rent	\$	Years There	Driver	rs Lience #		State	
Business Home Bas	sed? No L	ocation: Lease/Own	Leased	Lease Term	1 year	Monthly Rent	1,800.00
Landlord / Mortgage	e Co. Andy Diaz			Contac	it		
Contact Phone	(786) 285-4	708 Cell	(786)	285-4708	_ Email		
Bank Name/Branch	TD Bank/ North Be	each Contact	Maria		Phone	(305) 534-0867	
Trade Reference#1	Flower Place	Contact	Giselle		Phone	(786) 277-5711	
ridde rierereneen z					-		
Trade Reference#2		Contact	Court Roma	no	Phone	(305) 301-8410	
Trade Reference#2			Court Roma Jairo	no	Phone - Phone	(305) 301-8410 (305) 968-8868	

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	Tawnie Aguilar	Date	06/14/2018
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