

DBA Name		Gloria D Rodriguez				gal Name	Mile High Services LLC			
Type of Business		Transportation, Dispatch Services, Ta Services			ices, Tax T	ax ID	30-0853243		LLC	
Full Business Addre	SS .	6401 E 72	2nd Ave Suite 2	05, Co	mmerce Ci	ty, CO 80022				
Full Billing Address										
Phone at Location		(303) 287-9218			Best Phone (303)) 287-9218	Fax	(303) 287-9203	
Business Email		milehighservicesco@gmail.com			m Website					
Years In Business		2	Average Tic			ket		Gross Annual Sales 250,000		
Do you currently ha	ave cash a	advance?	No	V	Vith who? _			Bala	ance	
Current Credit Card	d Processo	ır				Average	Processing Vol	ume		
Last Month Vol.			#of Tickets			2nd Month Vol.		#of	Tickets	
3rd Month Vol.			#of Tickets			4th Month Vol.		#of	Tickets	
Owner #1 Name	Gloria Roc	driguez			Title	Owner				
Date of Birth	03061957	1			SSN	551-94-3	379			
Full Home Address	10253 Sal	lida Street		-						
Home Phone	(303) 287	-9218	Cell Phone		(720) 323-4	163 Email	gloria(@mhs-co.co	om	
Own/Rent	\$ <u>0 Own</u>		Years There	2	Dı	rivers Lience #		State		
Owner #2 Name					Title					
Date of Birth					SSN					
Full Home Address					3314					
Home Phone			Cell Phone			Email				
Own/Rent	\$		— Years There	_	Dı	rivers Lience #		State		
Business Home Bas	ed?	No	Location: Lease	e/Own	Leased	Lease Ter	m	Mon	thly Rent	
Landlord / Mortgage	 e Co.					 Cont	act			
Contact Phone	_			Cel	I		Emai			
Bank Name/Branch	TCF Ban	ık	Со	ntact			Phone			
Trade Reference#1			Co	ntact			— Phone			
Trade Reference#2			Co	ntact			— Phone			
Trade Reference#3			Co	ntact			 Phone			
I hereby represent that all authorize you to whom this									above information, the applicant(

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	Gloria Rodriguez	Date	01/30/2017