MoneyWorks >	ADMINISTRATIVE FORM PLEASE FAX TO:1.646.417.5809
woney works	Sales Rep: Julian

DBA Name		Multiple DBAs			Legal Name	SHO Produc	SHO Products, LLC		
Type of Business		Distribution			Tax ID	474349639			
Full Business Addre	SS	1242 Vale	encia Street, Los	Angeles, CA 9	0015			·	
Full Billing Address									
Phone at Location		(908) 947-8590			Best Phone (908) 947-8590 Fax				
Business Email		sam@shoproducts.co			Website	www.rosinte	www.rosintechproducts.com		
Years In Business		4	4 Average Ticket			Gross Annua	Gross Annual Sales 8,000,000.0		
Do you currently h	ave cas	h advance?	No	With who?			Balance		
Current Credit Card	d Proces	ssor			Averag	ge Processing Vo	olume		
Last Month Vol.			#of Tickets		2nd Month Vo	ıl	#of Tickets		
3rd Month Vol.			#of Tickets		4th Month Vo	l	#of Tickets		
Owner #1 Name	Samue	l lurist		Tit	le CEO				
Date of Birth	151219	-		SS		8040			
Full Home Address	757 Oc	ean Avenue							
Home Phone	(908) 9	47-8590	Cell Phone	(908) 947	-8590 Email	sam@	shoproductsteam.com		
Own/Rent	\$ 0 Re	ent	Years There	2	Drivers Lience #	Y4898743	State CA		
Owner #2 Name				Tit					
Date of Birth				SS	N				
Full Home Address			C P		- "				
Home Phone			Cell Phone		Email				
Own/Rent	\$ Owi	1	Years There		Drivers Lience #		State		
Business Home Bas	ed?	No	Location: Lease/	Own <u>Lease</u>	d Lease Te	erm <u>3</u>	Monthly Rent	13,180.00	
Landlord / Mortgage	e Co.	SD Herman	Со		Cor	ntact	Gerg Herman		
Contact Phone		(213) 747-6	5531	Cell .	(213) 747-1109	Ema	il		
Bank Name/Branch			Con	tact		Phone			
Trade Reference#1			Con	tact		Phone			
Trade Reference#2			Con	tact		Phone			
Trade Reference#3			Con	tact		Phone			
I hereby represent that all	the above	information is	true and understand t	that making false s	tatements might be o	considered fraud. By I	providing the above inform	ation, the applicant(s)	

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 relating to any of you, to Money Works Direct and to each of the Recipients, on its own behalf.

Signature#1	Printed Name	Samuel Jurist	Date	09/30/2019