

DRA Name		O2living			_egal Name	Kais cafe in		
DBA Name		Restaurant			Tax ID		47-1966543	
			76 south lake blvd mahopac ny				<u> </u>	Corp
Full Business Addre	!SS	976 South 18	ake biva mano	pac ny 10541				
Full Billing Address		(0.4E) 0.03	9050		Doot Dhana (O	14) 204 0475	Fave	
Phone at Location (845) 803					Best Phone (9	14) 384-04/5	Fax	
Business Email		_	0@gmail.com		Website			
Years In Business		3	Averag	e Ticket _		Gross Annua	I Sales <u>225,000</u>	.00
Do you currently h	ave cash	advance?	No	With who?			Balance	
Current Credit Card	d Process	or			Avera	ge Processing Vo	olume	
Last Month Vol.		#	of Tickets		2nd Month Vo	ol	#of Tickets	
3rd Month Vol.		#	of Tickets		4th Month Vo	ol	#of Tickets	
Owner #1 Name	Daiana	iekocevic		T:41	a Dunaida			
Date of Birth		<u>, </u>		Titl				
Full Home Address	10/02/1980 187 rombout rd pleasnt valley ny 12569			SS	V 003-00	-9303		
Home Phone	(914) 384	•	Cell Phone	(914) 384	.0475 Email	kahir	aad60@gmail.com	
			-					
Own/Rent	\$ <u>0 Owr</u>		Years There	18	Drivers Lience #	952387788	State Ny	
Owner #2 Name				Titl	e			
Date of Birth				 SS				
Full Home Address								
Home Phone			Cell Phone		Email			
Own/Rent	\$		Years There		Drivers Lience #		State	
Business Home Bas	sed?	No Lo	cation: Lease/	Own <u>Lease</u>	dLease T	erm	Monthly Rent	
Landlord / Mortgage	e Co. <u>I</u> z	zzi albanese			Со	ntact	9143259795	
Contact Phone	<u>(</u>	914) 325-97	95	Cell _		Ema	il	
Bank Name/Branch	Chase I	bank	Cont	act		Phone		
Trade Reference#1 New roc foods			Cont	act Tomm	/	Phone	(914) 654-6566	
Trade Reference#2 Perfomance			Cont	act Sal		Phone	(914) 420-7993	
Trade Reference#3			Cont	act		Phone		
I hereby represent that all	the above in	oformation is true	and understand t	hat making falso st	atomonts might be	considered fraud. By	providing the above inform	nation 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 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	Dajana Ljekocevic	Date	04/11/2017
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