

DBA Name	SL Builders & Associates, LLC		Legal Name	SL Builders & Associates, LLC	
Type of Business	General Contractor		Tax ID	80-0256593	LLC
Full Business Address	35 W Pine St. Unit 213				
Full Billing Address					
Phone at Location	(407) 796-1401		Best Phone	(407) 796-1401	Fax
Business Email	SLee@yourfloridacontractor.com		Website	yourfloridacontractor.com	
Years In Business	7	Average Ticket		Gross Annual Sales	250,000.00
Do you currently have cash advance?	Yes	With who?	Accel Capital		Balance 25000
Current Credit Card Processor			Average Processing Volume		
Last Month Vol.		#of Tickets		2nd Month Vol.	
					#of Tickets
3rd Month Vol.		#of Tickets		4th Month Vol.	
					#of Tickets

Owner #1 Name	Samuel Lee		Title	MGR	
Date of Birth	11-19-1983		SSN	591-24-5340	
Full Home Address	4876 Cypress Woods Drive Orlando, FL 32811				
Home Phone	(407) 548-4151	Cell Phone		Email	slee@yourfloridacontractor.com
Own/Rent	\$ 0 Rent	Years There		Drivers Lience #	I000781834190 State Florida
Owner #2 Name			Title		
Date of Birth			SSN		
Full Home Address					
Home Phone		Cell Phone		Email	
Own/Rent	\$	Years There		Drivers Lience #	State

Business Home Based?	No	Location: Lease/Own	Leased	Lease Term	3 Months	Monthly Rent	375.00
Landlord / Mortgage Co.				Contact	Miguel		
Contact Phone		Cell	(631) 741-4504	Email			

Bank Name/Branch	Chase Bank	Contact		Phone	
Trade Reference#1	Subcontractor	Contact	Marlo Dickens	Phone	(321) 331-9654
Trade Reference#2	Frazee Inc.	Contact	Clark Frazee	Phone	(407) 448-2405
Trade Reference#3	Attorney	Contact	Reggie Reeves	Phone	(904) 200-1401

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 pertinent 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 above listed business and business owner/officer (individually and collectively, "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 transaction, including without limitation the application therefor (collectively, "Transaction") 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

Samuel Lee

Date

11/21/2016