

DBA Name		The Pres	tige Grou	p LLC	Le	egal Name	<u>Th</u>	ne Prestige	Group LLC	· ·	
Type of Business		Construc	tion Man	agement	T	ax ID	45	3915763			LLC
Full Business Addre	SS	50 Bridge	Street								
Full Billing Address											
Phone at Location	(551) 482-0075			Best Phone (551) 4			2-0075	Fax			
Business Email	julien@the-prestige-group.c			ge-group.cor	m Website		ht	http://www.the-prestige-group.com			
Years In Business		5 Average Ticl			ket		Gro	Gross Annual Sales 850,000.00			
Do you currently ha	ave cash	advance?		No V	Vith who? _				Bala	nce	
Current Credit Card Processor				Average Processing Volume							
Last Month Vol.			#of Ticke	ets		2nd Month Vo	ol		#of 7	ickets	
3rd Month Vol.			#of Ticke	ets		4th Month Vo	ol		#of 7	ickets	
Owner #1 Name	Julien Leg	geard			Title						
Date of Birth	SSN 630-98-6845 50 Bridge Street Suite 305										
Full Home Address					/FF1) 402 0	107E F!		:!:==)		
Home Phone	 			(551) 482-0075 Email julien@the-prestige-group.com							
Own/Rent	\$ <u>0 Ren</u>	ıt	Years	There 5	D	rivers Lience #	39844	1/148	State	New York	_
Owner #2 Name Title											
Date of Birth					SSN						
Full Home Address											
Home Phone			Cell Ph	none		Email					
Own/Rent	\$		— Years	There	D	rivers Lience #			State		_
Business Home Based? Yes Location: Lease/Own Leased Lease Term Monthly Rent											
·											
Landlord / Mortgage Co. Eugene Davidov Contact											
Contact Phone	_			Cell	<u> </u>			Email			
Bank Name/Branch	TD Ban	k		Contact				Phone	(646) 34	4-4800	
Trade Reference#1	Ateliers Gohard Corp Contact			Contact	Sebastien Vallin			Phone	(929) 24	9-9258	
Trade Reference#2	La Con	ciergerie Ll	LC	Contact	Quentin	Violier		Phone	(917) 68	3-4949	
Trade Reference#3	Mod Ar	c Studio LL	.C	Contact	Valmira	Gashi		Phone	(201) 31	0-9183	

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	Julien Legeard	Date	09/06/2016
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