Money Works Direct ADMINISTRATIVE FORM PLEASE FAX TO:1.646.417.580	9
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DBA Name		Performacrete			Legal Nam	ne	Performacrete			
Type of Business	manufacturing/retail			_Tax ID		472782885			Corp	
Full Business Addre	:SS	315 Stan D	rive #3 Melbo	urne, FL 3290	4					
Full Billing Address										
Phone at Location		(321) 626-0840			Best Phone (321) 525-9193 Fax			(888)	468-9533	
Business Email		mjwpb@hotmail.com			Website perfo		performacre	formacrete.com		
Years In Business		3	Averag	je Ticket			Gross Annual	Sales 4	00,000.0	0
Do you currently h	ave cash	advance?	Yes	With who	? On Deck,	Velocity		Balan	ce <u>35,00</u>	0 10,000
Current Credit Card	d Process	or				Average I	Processing Vol	lume		
Last Month Vol.		#	of Tickets		2nd Mo	nth Vol.		#of Tid	ckets	
3rd Month Vol.		#	of Tickets		4th Mo	nth Vol.		#of Tid	ckets	
Owner #1 Name	Michael	Mators		т:	tle I	President				
Date of Birth	0803196				_	594-26-634	1			
Full Home Address		Ave Indialant	ic FI 32903			334 20 034	-			
Home Phone	(321) 70		Cell Phone	(321) 52!	5-9193 i	Email	miwnh	@hotmail.cor	 n	
Own/Rent	\$ 0 Ow		Years There	8	Drivers Lie		862550682830	State	FL	
2,	T									
Owner #2 Name				Ti	tle					
Date of Birth					SN –					
Full Home Address										
Home Phone			Cell Phone		I	Email				
Own/Rent	\$		Years There		_Drivers Lie	nce #		State		
Business Home Bas	sed?	No Lo	ocation: Lease	Own Leas	ed Le	ease Term	3 years	Month	ly Rent	3,463.00
Landlord / Mortgag	e Co.	Southtrend r	ealty		_	Contac	ct	Adam Rath	ıburn	
Contact Phone	<u>(</u>	321) 752-11	199	Cell			_ Emai	l		
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 i	nformation is tru	ue and understand	that making false	statements m	ight be cons	idered fraud. By n	roviding the abo	ve informat	ion, 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	Michael Waters	Date	12/02/2016