

DBA Name		South sl	hore bicycles	Le	egal Name	Jrnco bike corp		
Type of Business		Retail bicycles		Tax ID		45-38256		Corp
Full Business Addre	ess	1067 bro	oadway					
Full Billing Address								
Phone at Location		(516) 374-0606		Best Phone (516) 83		6) 815-4149	Fax	
Business Email					Website			
Years In Business		11	Average T	icket		Gross Annual Sa	ales <u>750,000</u>	.00
Do you currently h	ave cash a	advance?	Yes	With who? A	ce funding		Balance 300	00
Current Credit Card	d Processo	r			Average	e Processing Volum	ne	
Last Month Vol.			#of Tickets		2nd Month Vol.		#of Tickets	
3rd Month Vol.			#of Tickets		4th Month Vol.		#of Tickets	
Owner #1 Name	Justin Fuc	hs		Title	President			
Date of Birth	26081980)		– SSN	102-76-8	209		
Full Home Address	201 east l	ake blvd		_				
Home Phone	(516) 815	-4149	Cell Phone		Email	Southsho	rebicyclesvs@gma	ail.com
Own/Rent	\$ <u>0</u> Own		Years There	D	rivers Lience #	962803278	State Ny	
								
Owner #2 Name Date of Birth				Title				
Full Home Address				SSN —				
Home Phone			Cell Phone		Email			
Own/Rent	\$		Years There	D	rivers Lience #		State	
					-		<u>-</u>	
Business Home Bas	sed?	No	Location: Lease/Ow	n <u>Leased</u>	Lease Tei	rm	Monthly Rent	
Landlord / Mortgage Co.				Cont	act _			
Contact Phone	_		Ce	ell		Email		
Bank Name/Branch	Chase b	ank	Contact			Phone		
Trade Reference#1			Contact	•		Phone		
Trade Reference#2			Contact	:		Phone		
Trade Reference#3			Contact			Phone		
I hereby represent that all	the above inf	ormation is	true and understand that i	making false stat	tements might be co	nsidered fraud. By provi	ding the above inforn	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	Justin Fuchs	Date	06/20/2019
-------------	--------------	--------------	------	------------