AHLAB BUSINESS CONCEPTS_Application.pdf

COMMISSIONER FOR OATHS

Note: If there is insufficient space on the form to provide any information required, please attach a separate sheet containing the information set out in the prescribed form

PRESENTED FOR FILING BY:

NAME: AYANLOLA KOLAWOLE SAMUEL

ACCREDITATION

NO.

(if applicable)

ADDRESS: 20B Akin Osiyemi Street, Off Allen Avenue, Ikeja, Lagos. (Ikeja, LAGOS)

TEL. NO.: 08036465212

E-MAIL: kolawoleayanlola@gmail.com

Certified True Copy

0 4 E & 2019

NAME

REGISTRAR OF BUSINESS NAMES

N/A