

## New Business License Registration

Service Company Name Class License Type Industry Type of Organization		New Registration SOMLINK LOGISTIC SERVICES C Service Provider License Logistics & Supply Chain Sole Proprietorship		
Agency License Required		NO		
Ownership Details				
Name		Gei	nder	Ownership %
AHMED MAXAN	MED XAAJI CABDALLE	Μ	ALE	100%
Total ownership Percentage % 100%				
Contact Details				
Phone Number(s) 090563131 Email - GAROWE Address GAROWE		4 / 0905631314		
NUGAAL				
Contact Person				
Full Name	AHMED MAXAMED XAA CABDALLE	JI		
Contact	0905631314 / 09056313	314		
Gender	MALE			
Birth Date	29-Nov-1985	Place of Birth	garowe	
Occupation	owner			