



**PETER ALDANA
COUNTY OF RIVERSIDE
ASSESSOR-COUNTY CLERK-RECORDER**

Mail To: P.O. Box 751, Riverside, CA 92502-0751 -- (951) 486-7000

OFFICE OF THE COUNTY CLERK

<p>FICTITIOUS BUSINESS NAME STATEMENT</p> <p>SEE REVERSE SIDE FOR FEES AND INSTRUCTIONS</p> <p>- USE BLACK INK ONLY - MUST BE TYPED OR PRINTED INITIAL CROSS OUTS NO WHITE OUT ALLOWED</p> <div style="border: 1px solid black; padding: 5px; margin: 5px 0;"> <p align="center">CLERK'S USE ONLY</p> <p>\$ _____ # <u>24-237659</u></p> <p align="center">Fee Receipt</p> <p>Comments: _____</p> </div> <p>THE FOLLOWING PERSON(S) IS (ARE) DOING BUSINESS AS:</p>	<p align="center">COUNTY CLERK'S FILING STAMP</p> <p>FILED</p> <p>County of Riverside Peter Aldana Assessor-County Clerk-Recorder R-202410620 08/19/2024 09:45 AM Fee: \$70.00 Page 1 of 2</p>
<p>1a. Fictitious Business Name (If more than one business name at same address - Attach Supplemental Sheet)</p> <p>LINQ MEDIA SOLUTIONS</p>	
<p>1b. List COMPLETE Physical Business Address (No P.O. Boxes or Postal Facilities)</p> <p>14485 SYLVESTER COURT, MORENO VALLEY, CA 92553</p> <p>Mailing Address (If different than business address - optional)</p>	<p>1c. Name of County (where business is located)</p> <p align="center">RIVERSIDE</p>
<p>2a. Registrant Information (Individual, Corp., LLC, Gen. Partner, etc.)</p> <p>ECOMMNEXIS LLC</p> <p>If individual-spell out first, middle and last names (use dash if no middle name)</p> <p>14485 SYLVESTER COURT</p> <p>Business Mailing Address (if Corp. or LLC enter the address as set out in its Articles of Inc.)</p> <p>MORENO VALLEY CA 92553</p> <p>City State Zip</p> <p>List State of Corp./LLC. Must be registered in California CA</p>	<p>2b. Registrant Information (Individual, Corp., LLC, Gen. Partner, etc.)</p> <p>If individual-spell out first, middle and last names (use dash if no middle name)</p> <p>Business Mailing Address (if Corp. or LLC enter the address as set out in its Articles of Inc.)</p> <p>City State Zip</p> <p>List State of Corp./LLC. Must be registered in California </p>
<p>2c. Registrant Information (Individual, Corp., LLC, Gen. Partner, etc.)</p> <p>If individual-spell out first, middle and last names (use dash if no middle name)</p> <p>Business Mailing Address (if Corp. or LLC enter the address as set out in its Articles of Inc.)</p> <p>City State Zip</p> <p>List State of Corp./LLC. Must be registered in California </p>	<p>2d. Registrant Information (Individual, Corp., LLC, Gen. Partner, etc.)</p> <p>If individual-spell out first, middle and last names (use dash if no middle name)</p> <p>Business Mailing Address (if Corp. or LLC enter the address as set out in its Articles of Inc.)</p> <p>City State Zip</p> <p>List State of Corp./LLC. Must be registered in California </p>
<p>3. This business is conducted by: (If More Than four Registrants - Attach Additional Sheet Showing Owner Information)</p> <p> <input type="checkbox"/> Individual <input type="checkbox"/> Married Couple <input type="checkbox"/> Trust <input type="checkbox"/> Corporation <input type="checkbox"/> General Partnership <input type="checkbox"/> A Limited Partnership <input type="checkbox"/> Co-partners <input type="checkbox"/> Joint Venture <input checked="" type="checkbox"/> Limited Liability Company <input type="checkbox"/> Limited Liability Partnership <input type="checkbox"/> An Unincorporated Association - other than a partnership <input type="checkbox"/> State or Local Registered Domestic Partnership </p>	
<p>4. <input checked="" type="checkbox"/> Registrant has not yet begun to transact business under the fictitious name(s) listed above.</p> <p><input type="checkbox"/> Registrant commenced to transact business under the fictitious business name(s) listed above on _____</p>	
<p>I declare that all the information in this statement is true and correct. (A registrant who declares as true any material matter pursuant to Section 17913 of the Business and Professions Code that the registrant knows to be false is guilty of a misdemeanor punishable by a fine not to exceed one thousand dollars (\$1,000).)</p>	
<p>5. Signature(s) (Only one is required)</p> <p>Typed or Printed Name(s) EDWARD J OWENS</p> <p>If LLC/Corp., Title of Manager or Officer MEMBER QC'D BY: </p>	
<p>THIS STATEMENT WAS FILED WITH THE COUNTY CLERK OF RIVERSIDE COUNTY ON DATE INDICATED BY FILE STAMP ABOVE</p>	
<p>NOTICE-IN ACCORDANCE WITH SUBDIVISION (a) OF SECTION 17920, A FICTITIOUS BUSINESS NAME STATEMENT GENERALLY EXPIRES AT THE END OF FIVE YEARS FROM THE DATE ON WHICH IT WAS FILED IN THE OFFICE OF THE COUNTY CLERK, EXCEPT, AS PROVIDED IN SUBDIVISION (b) OF SECTION 17920, WHERE IT EXPIRES 40 DAYS AFTER ANY CHANGE IN THE FACTS SET FORTH IN THIS STATEMENT PURSUANT TO SECTION 17913. A NEW FICTITIOUS BUSINESS NAME STATEMENT MUST BE FILED BEFORE THE EXPIRATION. THE FILING OF THIS STATEMENT DOES NOT OF ITSELF AUTHORIZE THE USE IN THIS STATE OF A FICTITIOUS BUSINESS NAME IN VIOLATION OF THE RIGHTS OF ANOTHER FEDERAL, STATE OR COMMON LAW (SEE SECTION 14411 ET SEQ., BUSINESS AND PROFESSIONAL CODE).</p>	<p>I HEREBY CERTIFY THAT THIS COPY IS A CORRECT COPY OF THE ORIGINAL STATEMENT ON FILE IN MY OFFICE.</p> <p align="center">PETER ALDANA</p> <p align="center">RIVERSIDE COUNTY CLERK</p> <p>By , Deputy</p>

<p>FICTITIOUS BUSINESS NAME ADDITIONAL INFORMATION (Business & Registrant names)</p> <p>FBN/ABANDONMENT FBN FILE NUMBER: <u>R-202410620</u></p> <p>PLEASE TYPE OR PRINT LEGIBLY IN BLACK INK</p>	<p>FILED County of Riverside Peter Aldana Assessor-County Clerk-Recorder R-202410620 08/19/2024 09:45 AM Fee: \$70.00</p>
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ADDITIONAL BUSINESS NAME(S)
(1) <u> LINQ WEB SOLUTIONS </u>
(2) <u> LINQ CONNECT MARKETING </u>
(3) _____
(4) _____
(5) _____

ADDITIONAL REGISTRANT NAME(S)	
<p>Name of Registrant – First, Middle and Last for individual or name of Corp./LLC</p> <p>Business Mailing Address (if Corp. or LLC enter the address as listed in the articles.)</p> <p>City _____ State _____ Zip _____</p> <p>If Corp., or LLC, then identify state of incorporation or organization (must be registered in CA).</p>	<p>Name of Registrant – First, Middle and Last for individual or name of Corp./LLC</p> <p>Business Mailing Address (if Corp. or LLC enter the address as listed in the articles.)</p> <p>City _____ State _____ Zip _____</p> <p>If Corp., or LLC, then identify state of incorporation or organization (must be registered in CA).</p>
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I HEREBY CERTIFY THAT THIS IS A CORRECT COPY OF THE ORIGINAL STATEMENT ON FILE IN MY OFFICE.

By Deonita Montina, Deputy

PETER ALDANA
Assessor, County Clerk, Recorder
County of Riverside



Peter Aldana
Riverside County
Assessor-County Clerk-Recorder
2724 Gateway Drive
Riverside, CA 92507
(951) 486-7000
www.rivcoacr.org

Receipt: 24-237659

Product	Name	Extended
FBNR	CLERK FBN RIVERSIDE	\$70.00
	Document #	R-202410620
	Document Info:	LINQ MEDIA SOLUTIONS
	# Pages	2
	# Business Names	3
	# Registrants	1
Sub-Total		\$70.00
Service Fee		\$1.60
Total		\$71.60
Tender (Credit Card OTC)		\$71.60
Transaction ID	22208795302	
Service Fee	\$1.60	
Credit Card #	*****0379	
Entry method	Chip	
Auth Code	252604	
Credit Card Invoice #	BPI3347S256	
Customer Name	Edward Jones	
Customer Phone Number	(909) 227-1142	

Signature