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(Requestor's Name)				
(Address)					
(Address)					
(City/State/Zip/Pho	ne #)				
PICK-UP WAIT	MAIL				
(Business Entity Name)					
(Document Number)					
Certified Copies Certificates of Status					
Special Instructions to Filing Officer:					
CUST NOT Avail W	6-55029				

Office Use Only



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K.SALY EXMINITER

AUU 23



August 9, 2016

NICHOLAS VUJNICH LEAD MAX, LLC 1956 NE 5TH AVE, STE. 7 BOCA RATON, FL 33431

SUBJECT: LEAD MAX LLC Ref. Number: W16000055029

We have received your document for LEAD MAX LLC and your check(s) totaling \$160.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name of your limited liability company is not available in the state of Florida since it is the same as, or it is not distinguishable from the name of an existing entity on our records. Therefore, the limited liability company must select an alternate name for use in the state of Florida.

Please insert the alternate name in the space provided on the application form.

The alternate name must contain the words "Limited Liability Company," the abbreviation "L.L.C.," or the designation "LLC." The following suffixes are no longer acceptable: "Limited Company," "L.C.," and "LC". The abbreviations "Ltd." and "Co.", also are no longer acceptable.

The document number of the name conflict is L14000052405 "LEADMAX LLC".

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Letter Number: 216A00016740

Karen A Saly Regulatory Specialist II

COVER LETTER

то:	Registration Section Division of Corporations	1			
SUBJEC	CT: LEADI	MAX, LLC Name of Li	imited Liability Company		
The encl Existence	osed "Application by Fore e, and check are submitted	ign Limited Liability Compa to register the above referen	ny for Authorization to Traced foreign limited liabili	ransact Business in Florida," Certificate of ty company to transact business in Florida	
Please ro	eturn all correspondence co	oncerning this matter to the fo	ollowing:		
	NIC	CHOLAS VU	DJNICH ne of Person		
LEADMAX, LLC Firm/Company					
1956 NE 5TH AVE, SUITE 7					
BOCA RATON, FL 33431 City/State and Zip Code					
	NI	E-mail address: (to be used	IALLOGIC for future annual report no	otification)	
For furth	ner information concerning	this matter, please call:			
	NZCHOLAS Name of	VUJNICH Contact Person	at (<u>253</u>) <u>2</u> Area Code Da	21-2938 oytime Telephone Number	
	MAILING ADDRESS: Division of Corporations Registration Section P.O. Box 6327 Tallahassee, FL 32314		Division Registra Clifton 2661 Ex	T ADDRESS: n of Corporations ution Section Building secutive Center Circle ssee, FL 32301	
Enclose	d is a check for the followi □ \$125.00 Filing Fee	ng amount: ☐ \$130.00 Filing Fee & Certificate of Status	□ \$155.00 Filing Fee & Certified Copy	\$160.00 Filing Fee, Certificate of Status & Certified Copy	

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 605.0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA: (Name of Foreign Limited Liability Company, must include "Limited Liability Company," "L.L.C.," or "LLC.") LEADMAX MARKETING LLC (If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida. The alternate name must include "Limited Liability Company," "L.L.C," or "LLC.") 3. <u>81-2918716</u> (FEI number, if applicable) DELA WANC (Jurisdiction under the law of which foreign limited liability company is organized) (Date first transacted business in Florida, if prior to registration.) (See sections 605.0904 & 605.0905, F.S. to determine penalty liability) MOHIGAN CIRCLE 7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) TASOM VUTNICH Name: Office Address: 1956 NE STH AVE SUITE 7 Registered agent's acceptance: Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to complywith the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent. 8. The name, title or capacity and address of the person(s) who has/have authority to manage is/are: NICHOLAS VUINICH, OFFICE MANAGEN BOCA RATON 9. Attached is a certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in the jurisdiction under the law of which it is organized. (If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted) Signature of an authorized person This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S. NICHOLAS VUTMICH

Typed or printed name of signee

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Delaware The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "LEADMAX LLC" IS DULY FORMED UNDER THE

LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A

LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF

THE TWENTY-SEVENTH DAY OF JULY, A.D. 2016.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL FRANCHISE TAXES HAVE BEEN ASSESSED TO DATE.

2016 AUG 22 PH W 19



Authentication: 202729774

Date: 07-27-16

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SR# 20165099187