

L16000232012

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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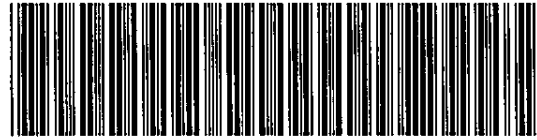
(Business Entity Name)

(Document Number)

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TALLAHASSEE FLORIDA

12/28/16

**COVER LETTER**

**TO: Registration Section  
Division of Corporations**

**SUBJECT:** SEMAJ LEAD GENERATION MARKETING SERVICES, "LLC."  
Name of Limited Liability Company

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

JIMMIE FREEMAN, JR.

Name of Person

SEMAJ LEAD GENERATION MARKETING SERVICES, "LLC."

Firm/Company

2084 HARTFORD PLACE

Address

ORLANDO, FLORIDA 32808

City/State and Zip Code

freemanj1012@gmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

JIMMIE FREEMAN, JR.

407

928-6487

at ( )

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

\$125.00 Filing Fee

\$130.00 Filing Fee &  
Certificate of Status

\$155.00 Filing Fee &  
Certified Copy  
(additional copy is enclosed)

\$160.00 Filing Fee,  
Certificate of Status &  
Certified Copy  
(additional copy is enclosed)

**Mailing Address**

New Filing Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Street Address**

New Filing Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

December 16, 2016

JIMMIE FREEMAN, JR  
2084 HARTFORD PLACE  
ORLANDO, FL 32808

SUBJECT: SEMAJ LEAD GENERATION MARKETING SERVICES, "LLC"  
Ref. Number: W16000084261

We have received your document for SEMAJ LEAD GENERATION MARKETING SERVICES, "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):

List the Name in Article IV.

Most financial institutions require the name(s) and address(es) of persons authorized to manage the limited liability company be listed on our records in order for the business entity to open a bank account. You may wish to revise your document to include the name, address, and title of such persons. Such titles may include: Manager (MGR), Authorized Member (AMBR), Authorized Person (AP), or Authorized Representative (AR).

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) 245-6052.

Neysa Culligan  
Regulatory Specialist II

Letter Number: 716A00026824

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

SEMAJ LEAD GENERATION MARKETING SERVICES, "LLC."

(Must end with the words "Limited Liability Company, "L.L.C.," or "LLC.")

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

Principal Office Address:

Mailing Address:

2084 HARTFORD PLACE  
ORLANDO, FLORIDA  
32808

2084 HARTFORD PLACE  
ORLANDO, FLORIDA  
32808

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

The name and the Florida street address of the registered agent are:

JIMMIE FREEMAN, JR.  
Name

2084 HARTFORD PLACE  
Florida street address (P.O. Box **NOT** acceptable)

ORLANDO                      FLORIDA                      32808  
City                              State                              Zip

SECRETARY OF STATE  
TALLAHASSEE FLORIDA  
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*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 certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S.*

  
Registered Agent's Signature (REQUIRED)

(CONTINUED)

**ARTICLE IV-**

The name and address of each person authorized to manage and control the Limited Liability Company:

**Title:**

"AMBR" = Authorized Member

"MGR" = Manager

MGR

**Name and Address:**

Jimmie Freeman, Jr.

2084 HARTFORD PLACE

ORLANDO, FLORIDA

32808

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SECRETARY OF STATE  
TALLAHASSEE FLORIDA

(Use attachment if necessary)

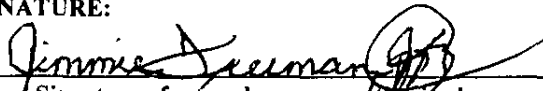
**ARTICLE V:** Effective date, if other than the date of filing: JANUARY 01, 2017 (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

**ARTICLE VI:** Other provisions, if any.

**REQUIRED SIGNATURE:**



Signature of a member or an authorized representative of a member.

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.

JIMMIE FREEMAN, JR.

Typed or printed name of signee

**Filing Fees:**

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)