

L21000140743

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

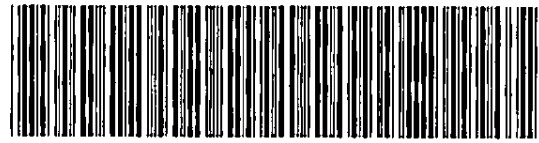
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



100353086091

10/06/20--01008--010 \*155.00

FILED  
21 APR -5 AM 8:23  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

*filed 4/5/21*

D O'KEEFE

APR - 2021

W20-124676

L



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

October 27, 2020

ROMAIN BRUCE JOSEPH  
321 NW 28TH WAY  
FORT LAUDERDALE, FL 33311

SUBJECT: URANUS FIVE PROPERTY MAINTENANCE AND MANAGEMENT  
L.L.C.  
Ref. Number: W20000124676

We have received your document for URANUS FIVE PROPERTY  
MAINTENANCE AND MANAGEMENT L.L.C. and your check(s) totaling \$155.00.  
However, the enclosed document has not been filed and is being returned for the  
following correction(s):

The mailing address is missing a zip code.

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.

DANIEL L O'KEEFE  
Regulatory Specialist II

Letter Number: 120A00021410

FILED  
21 APR -5 AM 8: 23  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

COVER LETTER

TO: New Filing Section  
Division of Corporations

SUBJECT: Uranus Five Property Maintenance and Management  
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:

Romain Bruce Joseph  
Name of Person

NA  
Firm/Company

321 NW 28th way  
Address

Fort Lauderdale, FL 33311  
City/State and Zip Code

BRC.joseph@yahoo.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Romain B. Joseph at ( 954 ) 588.3920  
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  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Uranus Five Property Maintenance and Management L.L.C  
(Must contain 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:

321 NW 28th way  
Ft Lauderdale, FL  
33311

2637 E. Atlantic  
Bldg Pompano  
Beach, FL 33062

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:

Romain Bruce Joseph  
Name

321 NW 28th way Ft Lauderdale 33311  
Florida street address (P.O. Box NOT acceptable)

Ft Laud. FL 33311  
City State Zip

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.

[Signature]  
Registered Agent's Signature (REQUIRED)

(CONTINUED)

FILED  
21 APR -5 AM 8:23  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

ARTICLE IV-

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

Title:

Name and Address:

"AMBR" = Authorized Member

"MGR" = Manager

Director D

Romain B Joseph  
321 NW 28th way Ft  
Laud. FL 33311

Assistant

Jharvis B Joseph

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: Jan. 1 - 2021 (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.

\_\_\_\_\_  
\_\_\_\_\_

FILED  
21 APR -5 AM 9:23  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**REQUIRED SIGNATURE**

Romain B Joseph

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.

Romain Bruce Joseph  
Typed or printed name of signer

**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)