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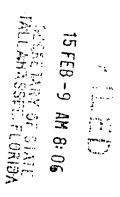
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J. Stilvers FEB 17 2015

## **COVER LETTER**

TO:	Registration Section Division of Corporations		
SUBJE	CT: B205 COBBLESONE LLC Name of Lin	nited Liability Company	
The end	closed Articles of Organization and fee(s) ar	e submitted for filing.	
Please 1	return all correspondence concerning this ma	atter to the following:	
	LI LIU	Name of Person	
	LIBO INVESTMENTS, INC	Firm/Company	
	3660 MIDLAND AVENUE, SUITE 3	301F Address	
	TORONTO ONTARIO CANARA		
		City/State and Zip Code	
Ľί	LIU_REALTY@ROGERS.COM, BOBF E-mail address: (to be use	AMSAY@ROGERS.COM d for future annual report notifica	tion)
For fur	ther information concerning this matter, plea	ase call:	
<u>LI LIU</u>	at ( i	647 ) 330-6967 Area Code Daytime Tel	ephone Number
Enclos	ed is a check for the following amount:		
<b>☑</b> \$125.0	0 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 Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street/Courier Adda Registration Section Division of Corporat Clifton Building 2661 Executive Cent Tallahassee, FL 3230	ions ter Circle

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:	
B205 COBBLESTONE LLC (Must end with the words "Limited L	iability Compány, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address of the principal offi	ce of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
5887 COBBLESONE LANE, B205 NAPLES, FL 34112	3660 MIDLAND AVENUE. SUITE 301F TORONTO, ON CANADA M1V 0B8
ARTICLE III - Registered Agent, Registered Office, & (The Limited Liability Company cannot serve as its own R another business entity with an active Florida registration.	Registered Agent's Signature: egistered Agent. You must designate an individual or
The name and the Florida street address of the registered a  Charlehe  Name  5869 Cob	Vandenberg  blestone LN. #202  NOT acceptable)  FL 34112  Zip
Florida street address (P.O. Box )	NOT acceptable)
Naples div	FL 3411 <sup>2</sup>
Having been named as registered agent and to accept servence the place designated in this certificate, I hereby accept capacity. I further agree to comply with the provisions of my duties, and I am familiar with and accept the obli	vice of process for the above stated limited liability company at the appointment as registered agent and agree to act in this fall statutes relating to the proper and complete performance gations of my position as registered agent as provided for in or 605, F.S.
Charlen	Vandenker of
Registered Agent's Signatu	ire (REQUIRED)
(CONTINUE	ire (REQUIRED)
Page 1 of 2	15 FEB -9 AM 8: 06  LENKSSEE FLORIDA  E

Title: "AMBR" = Authorized Member	Name and Address:
"MGR" = Manager AMBR	ROBERT RAMSAY
	3660 MIDLAND AVENUE, SUITE 301F TORONTO, ON, CANADA, M1V 0B8
MGR	LI LIU
	3660 MIDLAND AVENUE, SUITE 301F TORONOT, ON, CANADA, M1V 0B8
MEMBER	LIBO INVESTMENTS, INC
	3660 MIDLAND AVENUE, SUITE 301F TORONTO, ON, CANADA, M1V 0B8
(Use attachment if necessary)	
ARTICLE V: Effective date, if other than the date of filin (If an effective date is listed, the date must be specific a the date of filing.)	g: (OPTIONAL) nd cannot be more than five business days prior to or 90 days af
ARTICLE VI: Other provisions, if any.	
<u>REQUIRED</u> SIGNATURE:	^

(In accordance with section 605.0203 (1) (b), Florida Statutes, the execution of this document

LI LIU 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)