

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L01000020960

Entity Name: HALO POLO LLC

FILED
Mar 25, 2009
Secretary of State

Current Principal Place of Business:

12765 FOREST HILL BOULEVARD, SUITE 1302
WELLINGTON, FL 33414

New Principal Place of Business:

3629 AIKEN COURT
WELLINGTON, FL 33414 US

Current Mailing Address:

12765 FOREST HILL BOULEVARD, SUITE 1302
WELLINGTON, FL 33414

New Mailing Address:

C/O MARIO G. DE MENDOZA, III, P.A.
12765 FOREST HILL BLVD., SUITE 1302
WELLINGTON, FL 33414 US

FEI Number: 31-1813751

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MARIO G. DE MENDOZA, III, P.A.
12765 FOREST HILL BOULEVARD, SUITE 1302
WELLINGTON, FL 33414 US

Name and Address of New Registered Agent:

MARIO G. DE MENDOZA, III, P.A.
12765 FOREST HILL BOULEVARD
SUITE 1302
WELLINGTON, FL 33414 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

03/25/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: MELISSA POTAMKIN GAN, ZI
Address: 3629 AIKEN COURT
City-St-Zip: WELLINGTON, FL 33414

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: POTAMKIN GANZI, MELISSA
Address: 3629 AIKEN COURT
City-St-Zip: WELLINGTON, FL 33414 US

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: MELISSA POTAMKIN GANZI

MGRM

03/25/2009

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date