L05000021724

(Requestor's Name)		
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(City/State/Zip/Phone #)		
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(Business Entity Name)		
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LOS-21724		
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06 OCT 17 PM 3: 42

SECRETARY OF STATE
ALLARSSEE FLORIDA

N. Caffiguer. OCT 1 7.2006

COVER LETTER

TO: Registration Section Division of Corporations The Polo Lifestyle LLC SUBJECT:		
(Name of Limited Liability Company)		
The enclosed Articles of Dissolution and fee(s) are submitted for filing.		
Please return all correspondence concerning this matter to the following:		
Bruce Orosz (Name of Person)		
(Name of Person)		
The Polo Lifestyle LLC (Firm/Company)		
(Firm/Company)		
1220 Collins Avenue, Suite #330 (Address)		
Miami Beach, Fl 33139 (City/State and Zip Code)		
For further information concerning this matter, please call:		
Name of Person) at (305) 538-3809 (Name of Person) (Area Code & Daytime Telephone Number)		
Enclosed is a check for the following amount:		
\$25.00 Filing Fee & Certificate of Status S55.00 Filing Fee & Certificate of Status & Certified Copy (additional copy is enclosed) \$60.00 Filing Fee, Certified Copy (additional copy is enclosed)		

MAILING ADDRESS:

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

STREET/COURIER ADDRESS:

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



October 3, 2006

BRUCE OROSZ 1220 COLLINS AVENUE SUITE #330 MIAMI BEACH, FL 33139

SUBJECT: POLO LIFESTYLE, LLC

Ref. Number: L05000021724

We have received your document for POLO LIFESTYLE, LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The date the dissolution was approved cannot be in the future this document was received on 10/2/06.

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) 245-6067.

Neysa Culligan Document Specialist

Letter Number: 006A00058633

ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

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1. The name of a limited liability company is The Police	SECRETARY OF STATE L. TALLAHASSEE, FLORIDA
2. The Articles of Organization were filed on March 3vd, L05000021724	and assigned document number
3. The date the dissolution was approved: $10-01-06$	·····
4. A description of occurrence that resulted in the limited liability cor 608.441, Florida Statutes, (copy 608.441 on back cover letter).	110
has been completed.	
Dy majority votes, members Dilssolve the LLC.	have agreed to
5. CHECK ONE:	
All debts, obligations and liabilities of the limited liability OR- Adequate provision has been made for the debts, obligation	ons and liabilities pursuant to s. 608.4421.
6. All remaining property and assets have been distributed among its rights and interests.	members in accordance with their respective
7. CHECK ONE:	
There are no suits pending against the company in any country of the satisfaction of a entered against it in any pending suit.	
Signatures of the members having the same percentage of membership in	nterests necessary to approve the dissolution:
Signature	Printed Name
Set -	Bruce Ordsz
(M. Vinne)	Heinrich Nussli
- <i>C.</i> 7	