

L06000009862

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

(Document Number)

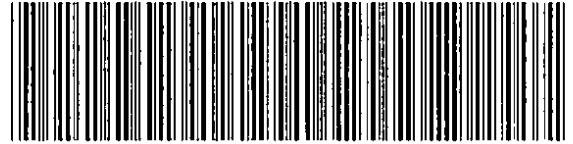
Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

J DENNIS

AUG 18 2023

Office Use Only



700412486787

07/21/23--01011--011 \*\*135.00

FILED  
SECRETARY OF STATE  
2023 JUL 21 PM 4:37

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Ambassador chem-dry  
(Name of Limited Liability Company)

The enclosed member, resignation or dissociation and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to:

John R Palmer  
(Contact Person)

Ambassador chem-dry  
(Firm/Company)

7517 SAVANNAH LN  
(Address)

Tampa, FL 33637  
(City/State and Zip Code)

For further information concerning this matter, please call:

John R Palmer at (813) 694-1366  
(Name of Contact Person) (Area Code & Daytime Telephone Number)

Enclosed please find a check made payable to the Florida Department of State for:

☒ \$25 Filing Fee

☐ \$55 Filing Fee & Certified Copy

**Mailing Address:**

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

**Street Address:**

Registration Section  
Division of Corporations  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303



FLORIDA DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS

**DISSOCIATION OR RESIGNATION OF MEMBER, MANAGER FROM  
FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY**

(Pursuant to 605.0216, Florida Statutes)

1. The name of the limited liability company as it appears on the records of the Florida Department of State is: Ambassador Chem-dry

2. The Florida document/registration number assigned to this limited liability company is:

LD6000098062

3. The date this member/manager withdrew/resigned or will withdraw/resign is: 9 / 21

4. I, John R Palmer, hereby withdraw/resign as a  
(Print Name of Person Resigning)

OWNER / manager  
(Print Title)

of this limited liability company and affirm the limited liability company has been notified of my resignation in writing.

John R Palmer

Signature of Dissociating Member or Resigning Manager

Filing Fee: \$25.00 (Required)  
Certified Copy: \$30.00 (Optional)

FILED  
CLERK OF STATE  
2023 JUL 21 PM 4:37