

107000006362

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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MAIL

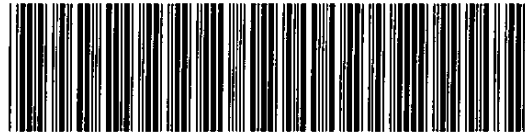
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA

DR

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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: AMBASSADOR SEASONAL CONCEPTS, LLC
(Name of Foreign Limited Liability Company)

Dear Sir or Madam:

The enclosed Affidavit by Foreign Limited Liability Company to Change Manager(s) or Managing Member(s) and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

ERNEST L. MASCARA

(Name of Person)

ERNEST L. MASCARA, P.A.

(Firm/Company)

475 CENTRAL AVENUE, SUITE 202

(Address)

ST. PETERSBURG, FL 33701

(City/State and Zip Code)

For further information concerning this matter, please call:

ERNEST L. MASCARA

(Name of Person)

at (727) 896-1200

(Area Code and Daytime Telephone Number)

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TALLAHASSEE, FLORIDA

STREET/COURIER ADDRESS:

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

MAILING ADDRESS:

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

Enclosed is a check for the following amount:

☐ \$25 Filing Fee

☐ \$30 Filing Fee &
Certificate of Status

☒ \$55.00 Filing Fee &
Certified Copy

☐ \$60 Filing Fee,
Certificate of Status &
Certified Copy



FLORIDA DEPARTMENT OF STATE
Division of Corporations

November 6, 2007

ERNEST L. MASCARA
ERNEST L. MASCARA, P.A.
475 CENTRAL AVENUE, SUITE 202
ST. PETERSBURG, FL 33701

SUBJECT: AMBASSADOR SEASONAL CONCEPTS, LLC
Ref. Number: M07000006362

We have received your document for AMBASSADOR SEASONAL CONCEPTS, LLC and your check(s) totaling \$275.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing the proper form(s) with instructions for your convenience.

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) 245-6984.

Deborah Bruce
Regulatory Specialist II

Letter Number: 407A00064580

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TALLAHASSEE, FLORIDA

**AFFIDAVIT BY FOREIGN LIMITED LIABILITY COMPANY
TO CHANGE MANAGER(S) OR MANAGING MEMBER(S)**

1. The name of the limited liability company as it appears on the records of the Florida Department of State is: AMBASSADOR SEASONAL CONCEPTS, LLC
2. This entity was formed under the laws of: DELAWARE
3. This entity was authorized to transact business in Florida on 10/23/2007
and its Florida document/registration number is M07000006362
4. The name and address of each manager or managing member is as follows:

Title:

Name and Address:

"MGR" = Manager

"MGRM" = Managing Member

MGR

RONALD W. BALL

5384 GULF BLVD.

ST. PETE BEACH, FL 33706

MGR

GEORGE BENNETT

5384 GULF BLVD.

ST. PETE BEACH, FL 33706

MGR


ERNEST L. MASCARA

5384 GULF BLVD.

ST. PETE BEACH, FL 33706

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TALLAHASSEE FLORIDA

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Required Signature: 

(Signature of Manager, Managing Member or Member)

Filing Fee: \$25