

FD 3000/5054

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

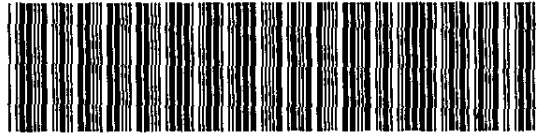
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**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** AMBROSE FLOORING SPECIALIST, INC  
(Name of Corporation)

**DOCUMENT NUMBER:** P03000150546

The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

KENNETH MISTELE

(Name of Person)

AMBROSE FLOORING SPECIALIST, INC

(Name of Firm/Company)

2880 N. WICKHAM RD # 610

(Address)

MELBOURNE, FLORIDA 32935

(City/State and Zip Code)

For further information concerning this matter, please call:

JOSEPH AMBROSE

(Name of Person)

at ( 321 ) 288-4879

(Area Code & Daytime Telephone Number)

Enclosed is a check for \$35.00 made payable to the Florida Department of State.

**Street Address:**

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

**Mailing Address:**

Amendment Section  
Division of Corporations  
Post Office Box 6327  
Tallahassee, FL 32314

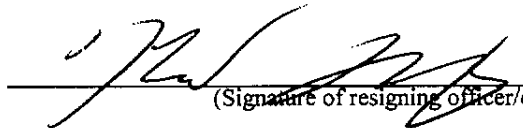
**OFFICER / DIRECTOR RESIGNATION  
FOR A CORPORATION**

I, KENNETH MISTELE, hereby resign as DIRECTOR/V.PRESIDENT  
(Title)

of AMBROSE FLOORING SPECIALIST, INC  
(Name of Corporation)

P03000150546, a corporation organized under the laws of the State of  
(Document Number, if known)

FLORIDA

  
(Signature of resigning officer/director)

**FILING FEE IS \$35.00**

**FILED**  
06 APR 21 PM 2:24  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**Make checks payable to Florida Department of State and mail to:**

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