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COVER LETTER

Amendment Section Division of Corporations

TO:

SUBJECT: Es Solutions Foundation, Inc. (Name of Corporation)
(Name of Corporation)
DOCUMENT NUMBER: N/000009994
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
(Name of Person)
(Name of Firm/Company)
1576 Bella Cruz Dr Suite 409 (Address)
(City/State and Zip Code)
For further information concerning this matter, please call:
(Name of Person) at (727) 490-1782 (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

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OFFICER / DIRECTOR RESIGNATION DEC 21 AM 9: 37

SECRETARY OF STATE

John P. Josep	(Title)
ES Jolut	(Name of Corporation)
/1000000 9999 (Document Number, if known)	, a corporation organized under the laws of the State of
Florida	·
•	
	Q_{\bullet}
	March Company

FILING FEE IS \$35.00

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

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