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(Address)
(Address)
(City/State/Zip/Phone #)
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(Document Number)
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Cape Coral, FL 33914
2 2+1 (239) 573-9601
jhartwich@hotmail.com
www.bestfloridaconsulting.com

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

02-09-2023

SUBJECT: Document # P22000088848

ES ALL Services Corp.

Dear Sirs,

attached please find the amendment for ES ALL Services Corp. and a check for the filing in the amount of

\$ 43.75

Best Plorida Consulting LLC

COVER LETTER

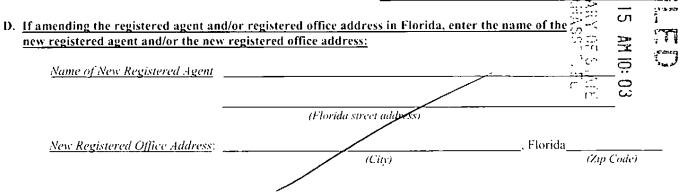
TO: Amendment Section Division of Corporations

NAME OF CORPORATION: ES	ALL Services Corp.
	22000088848
The enclosed Articles of Amendment and fee are	submitted for filing.
Please return all correspondence concerning this r	natter to the following:
Best Flo 1110 SI Cape	Address Coral FL 33914 City/ State and Zip Code We har twich Address Coral FL 33914 City/ State and Zip Code
E-mail addess: (to be	used for future annual report notification)
For further information concerning this matter, pl	ease call:
Juergen Hartwich Name of Contact Person Enclosed is a check for the following amount made	at (239) 573-960 B C C C C C C C C C
S35 Filing Fee S43.75 Filing Fee S Certificate of Status	\mathbb{C}
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment

Atticies of Affice	nument
to	
Articles of Incor	poration
of	
Es ALL Services	
(Name of Corporation as currently f	iled with the Florida Dept. of State)
P220000888	40
(Document Number of C	orporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this Flaits Articles of Incorporation: A. If amending name, enter the new name of the corporation:	orida Profit Corporation adopts the following amendment(s)
	The new
name must be distinguishable and contain the word "corporation," "con "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A p "chartered," "professional association," or the abbreviation "P.A."	
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	
C. Enter new mailing address, if applicable:	



New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

Signature of New Registered Agent, if changing

Check if applicable

☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and address of each Officer and/or Director being added:

(Attach additional sheets, if necessary)

Example:

4) ____ Change

___ Add

5) ____ Change

___ Add

6) ____ Change

Remove

_ Remove

Add

Please note the officer/director title by the first letter of the office title:

P = President: V= Vice President: T= Treasurer: S= Secretary: D= Director: TR= Trustee: C = Chairman or Clerk: CEO = Chief Executive Officer: CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.

Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is a change, Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

X Change PT <u>John Doe</u> X Remove Mike Jones \underline{X} Add Sally Smith Type of Action Title Address Name (Check One) Eduard Eichmann Kahlaecker Str. 35 V۴ 1) ____ Change Nucrn berg BV ____ Add X_Remove Klara Eichmann Kahlgecker Str.35 Vρ 2) ____ Change Nuernberg, BV X Add Remove 3) Change ____ Add __ Remove

f an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate NA)	Attach additiona	adding additional Articles, enter change(s) here: I sheets, if necessary). — (Be specific)
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(if not applicable, indicate N/A)	provisions for i	mplementing the amendment if not contained in the amendment itself:
	(if not appli	cable, indicate N/A)
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	if other than the
The date of each amendment(s) adopt date this document was signed	ion:
Effective date if applicable:	410 more than 90 days after amendment file dater
Note: If the date inserted in this block document's effective date on the Depar	toos not meet the applicable statutory filing requirements, this date will not be listed as t
Adoption of Amendment(s) The amendment(s) was were adopted.	(CHECK ONE) and the theorporators, or board of directors without shareholder action and shareholder
The amendment(s) was were adopt by the shareholders was were suffi	ed by the shareholders. The number of votes east for the amendment(s) identified for approval.
The amendment(s) was were appro- must be separately provided for ec-	wed by the shareholders through voting groups. The following statement sich voting group entitled to vote separately on the amendment(s) at the amendment(s) was/were sufficient for approval.
by	evoting group)
, startar	rector, president or other officer - if directors or officers have not been I, by an incorporator if in the hands of a receiver, trustee, or other court ed fiduciary by that fiduciary)
	Edyard Fichmann (Typed or printed name of person signing)
	Piesiclent (Title of person signing)