# P01000118543

(Requestor's Name)  (Address)  (Address)  (City/State/Zip/Phone #)	400041703264 W
PICK-UP WAIT MAIL  (Business Entity Name)	10/25/0401012018 **35.00 Amend nc
(Document Number)  Certified Copies Certificates of Status  Special Instructions to Filing Officer:	PILED OF DOT 25 PM 4: 52 SERVED SERVED

Office Use Only



#### PROFESSIONAL LIMITED COMPANY

#### ATTORNEYS AND COUNSELORS AT LAW

Desantis Professional Building 11891 U.S. Highway One, Suite 100 North Palm Beach, Florida 33408 (561) 776-8600 Fax (561) 622-2841 October 14, 2004

Department of State Amendment Section Division of Corporations P. O. Box 6237 Tallahassee, FL 32314

Re:

Sailfish Dental Services, Inc.

Name change and address changes

To Whom It May Concern:;

Enclosed it the amendment paperwork and check to change the name of the above referenced corporation to Implant Solutions Laboratory, Inc. They also wish to have the mailing address, location address and the address of the directors changed as noted below. Our client wants to make sure these address changes are also made on your internet site.

Correct Principal Address of the Corporation: 801 Maplewood Dr. #13 Jupiter, FL 33458

Correct Mailing Address of the Corporation: 801 Maplewood Dr. #13 Jupiter, FL 33458

Correct address for Alan Miller: 801 Maplewood Dr. #13 Jupiter, FL 33458

Correct address for Craig Russo: 801 Maplewood Dr. #13 Jupiter, FL 33458

Thank you so much, and please call, fax or e-mail me if you have any questions or concerns.

Sincerely.

Legal Assistant

alicia@lawpalmbeach.com

#### **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORP	ORATION:	Sailf	ish Dental	Services	, Inc.
DOCUMENT NU	MBER:	P0100	0118563		
The enclosed Artic	les of Amendment	and fee are	submitted for	filing.	
Please return all co	rrespondence conce	erning this	matter to the fo	llowing:	
	Alici	a Page			
<del></del>		(Name of	Contact Person)		
	Robert C. H			nal Limit	ed Company
		(Firm	/ Company)		
	11891 US Hi	.ghway O	nc, Ste. 1	.00	
		(A	(ddress)		
	North Palm	Beach,	FL 33408		
		(City/State	e/ and Zip Code)		<del>-</del>
For further informa	tion concerning thi	s matter, pl	lease call:		
	Alicia Page	·	_at (_ 561	622-27	00 Telephone Number)
(Name	of Contact Person)		(Area	Code & Daytime	Telephone Number)
Enclosed is a check	for the following	amount:			
☑ \$35 Filing Fee	□ \$43.75 Filing F Certificate of S		□ \$43.75 Fili Certified C (Additiona enclosed)	Copy l copy is	☐ \$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Ame Divi	ling Address endment Section ision of Corporatio Box 6327	ns	Ame Div	eet Address endment Section ision of Corpor E. Gaines Stre	ations

Tallahassee, FL 32399

Tallahassee, FL 32314

## Articles of Amendment

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### Articles of Incorporation of Sailfish Dental Services, Inc. (Name of corporation as currently filed with the Florida Dept. of State) P01000118563 (Document number of corporation (if known) Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to its Articles of Incorporation:

#### NEW CORPORATE NAME (if changing):

Implant Solutions Laboratory, Inc.
(Must contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.") (A professional corporation must contain the word "chartered", "professional association," or the abbreviation "P.A.")
AMENDMENTS ADOPTED- (OTHER THAN NAME CHANGE) Indicate Article Number(s) and/or Article Title(s) being amended, added or deleted: (BE SPECIFIC)
Article 4. Principal Office is changed to:
801 Maplewood Dr. #13, Jupiter, FL 33458
(Attach additional pages if necessary)
If an amendment provides for exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)

(continued)

The date of each amendment(s) a	doption:	Octobe	r 14,	2004	
Effective date if applicable:	October	14, 20	04		
(no	more than 90 d	ays after am	endment	file date)	
Adoption of Amendment(s)	(CHECK	ONE)			
The amendment(s) was/ the amendment(s) by the					
☐ The amendment(s) was/ following statement mus separately on the amena	t be separate				
"The number of vote	es cast for the				nt for approval by
		(voti	ig group)	_	
☐ The amendment(s) was/ and shareholder action v			oard of c	irectors without	t shareholder action
☐ The amendment(s) was/ shareholder action was i	not required.	•	-		reholder action and
Signed this 14 th day of 00	tober	2	.004	<i>!</i>	
Signature	aig le	, Ru	100	-	
selected, by	., pyroneens or	or - if in the		ctors or officers har a receiver, trustee, t	
	raig (	J. f	) \US	On signing)	<del></del>
	V. J		hels	on signing)	
		(Title of pa	rson sign	ing)	

FILING FEE: \$35