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TALLAHASSEE, FLORIDA

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J. Shivers MAR 16 2010

W10-11537
2590

COVER LETTER

Department of State
New Filing Section
Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314

SUBJECT: IMPLA-DENT, Inc.

(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are an original and one (1) copy of the articles of incorporation and a check for:

☒ \$70.00
Filing Fee

☐ \$78.75
Filing Fee
& Certificate of Status

☐ \$78.75
Filing Fee
& Certified Copy

☐ \$87.50
Filing Fee,
Certified Copy
& Certificate of
Status

ADDITIONAL COPY REQUIRED

FROM: Charles T. Lake

Name (Printed or typed)

5641 Virginia Avenue

Address

New Port Richey, FL 34652

City, State & Zip

352-359-1192

Daytime Telephone number

Smilemkr2005@msn.com

E-mail address: (to be used for future annual report notification)

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NOTE: Please provide the original and one copy of the articles.

ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I NAME

The name of the corporation shall be:

IMPLA-DENT, INC.

ARTICLE II PRINCIPAL OFFICE

The principal street address and mailing address, if different is:

5641 VIRGINIA AVENUE

NEW PORT RICHEY, FL 34652

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

DENTAL LABORATORY

ARTICLE IV SHARES

The number of shares of stock is:

1000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s):

CHARLES T. LAKE	ELEFThERIA K. LAKE
P, T	VP, S
5641 VIRGINIA AVENUE	5641 VIRGINIA AVENUE
NEW PORT RICHEY, FL 34652	NEW PORT RICHEY, FL 34652

ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

CHARLES T. LAKE

5641 VIRGINIA AVENUE

NEW PORT RICHEY, FL 34652

ARTICLE VII INCORPORATOR

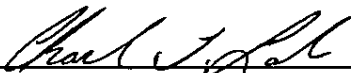
The name and address of the Incorporator is:

CHARLES T. LAKE

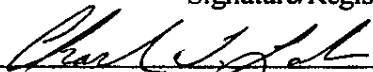
5641 VIRGINIA AVENUE

NEW PORT RICHEY, FL 34652

Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity



Signature/Registered Agent



Signature/Incorporator

03/10/2010

Date

03/10/2010

Date

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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