# P100000041257

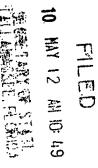
(Re	equestor's Name)	
(Ad	ldress)	
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(Cit	ty/State/Zip/Phon	e #)
PICK-UP	WAIT	MAIL
(Bu	siness Entity Nar	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filina Officer:	
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Office Use Only



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# **COVER LETTER**

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

SUBJECT:	IMPLANT ADU	ANTAGE, IN	<u>_</u>
	(PROPOSED CORPORA	TE NAME – <u>MUST INCL</u>	UDE SUFFIX)
Enclosed are an orig	inal and one (1) copy of the artic	cles of incorporation and	a check for:
■ \$70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	□ \$78.75 Filing Fee & Certified Copy	Certified Copy & Certificate of Status
		ADDITIONAL COPY REQUIRED	
FROM:		Finted or typed)	
	1590 Nh	ddress Ave,	SUITE 402
	BOCK RATE City,	N, FL 33! State & Zip	186
	561- 395- Daytime To	3503 elephone number	
	Doctang C	BELLSOUTH. NET	otification)

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:

IMPLANT ABUANTAGE, INC.

#### ARTICLE II PRINCIPAL OFFICE

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

1590 NW WILL #402, BUCA PATUN, FL 33486

#### ARTICLE III **PURPOSE**

The purpose for which the corporation is organized is:

DENTIFIC IMPLANT SERVICES

#### ARTICLE IV SHARES

The number of shares of stock is: 100

# ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

ROBERT E. LANE, 1590 NLI 10th AUE #402 BOLA RATON, FL 37406 - PRESIDENT SHARI B. GOLDSTEIN, 1590 NW 10th AUE #402. BOCK RATON, FL 33486-VICE PRESIDENT

## ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is: ROBERT E. LANE, 1590 NW BOLL AUC HYOZ BOLA RAFON, FL. 33486

## ARTICLE VII INCORPORATOR

The <u>name and address</u> of the Incorporator is:

BOSERT E. LANE, 1590 NW WILL BUE #402, BUCA POSTON, FL 33486

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