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Florida Department of State
Division of Corporations
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To:

Division of Corporations
Fax Number : (850)617-6381

From:

Account Name : RCA ACCOUNTING SERVICES CORP
Account Number : I20180000102
Phone : (305)799-7633
Fax Number : (786)783-3650

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: _____

**FLORIDA PROFIT/NON PROFIT CORPORATION
IMPLANT DENTAL SOLUTION**

Certificate of Status	1
Certified Copy	0
Page Count	01
Estimated Charge	\$78.75

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2023 SEP 11 PM 1:02

FLORIDA
DIVISION OF
CORPORATIONS

SEP 11 9:15

Electronic Filing Menu

Corporate Filing Menu

Help

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 DENTAL SOLUTION CORPORATION

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

3968 Tropical Way
Palm Springs Fl 33461

SAME AS PRINCIPAL

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: ANY AND ALL LAWFUL BUSINESS

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: JESUS ANDRES OSTOS PORRAS /P

Address: 3968 Tropical Way

Palm Springs Fl 33461

Name and Title: VERONICA DANIELA PELAYO PEREIRA /VP

Address: 3968 Tropical Way

Palm Springs Fl 33461

ARTICLE VI REGISTERED AGENT

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

Name JESUS ANDRES OSTOS PORRAS

Address: 3968 Tropical Way Palm Springs Fl 33461

ARTICLE VII INCORPORATOR

The name and address of the incorporator is:

Name: JESUS ANDRES OSTOS PORRAS

Address: 3968 Tropical Way Palm Springs Fl 33461

ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: _____ (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five days prior or 90 days after the filing.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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

12/1 Jesus Andres Ostos Porras 09/11/2023
Required Signature/Registered Agent Date

I submit this document and affirm that the facts stated herein are true. I am aware that the false information submitted in a document to the Department of State constitutes a third-degree felony as provided for in s.817.155, F.S.

12/1 Jesus Andres Ostos Porras 09/11/2023
Required Signature/Incorporator Date