**SERVICE TRANSFER CONFIRMATION FORM**

**Customer:**  
Iljuk Dental Conversion s.r.o. , Anatoli Iljuk  
Address: Křinické nám. 1161/10, 407 46 Krásná Lípa u Rumburka  
Phone: +420 777 070 862  
Company ID / VAT No.: 05624347

**I hereby confirm that I am transferring the service support and all matters related to the maintenance of the machine specified below to the following company:**

**New Service Provider:**  
CAD CAM DENT s.r.o.  
Address: Jaurisova 515/4, 14000, PRAHA 4  
Company ID / VAT No.: CZ07984154

**Subject of Transfer:**  
Machine Type: **Imes Icore Coritec 150 i PRO**  
Serial Number: **2022-S1-572**

**Declaration:**  
I declare that I am authorized to make decisions regarding the service and maintenance of the above-mentioned equipment. I agree that the company listed above will be responsible for providing all future service and support for this machine. I also consent to the transfer of relevant technical documentation, service history, and other necessary information to ensure a smooth handover.

**Date of Transfer:** 26/06/2025

**Customer Signature:**

.........................................................  
Anatoli Iljuk, company owner

**Date:** 26/06/2025

**New service provider Signature:**

**Customer Signature:**

.........................................................  
Petr Salek, CAD CAM DENT s.r.o.

**Date:** 26/06/2025