

L21000453913

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer

Office Use Only



500374169505

FILED  
2021 OCT 19 PM 4:00  
CLERK OF SUPERIOR COURT  
ALABAMA

RECEIVED  
2021 OCT 19 AM 11:54  
ALABAMA SECRETARY OF REVENUE

CORPORATION SERVICE COMPANY  
1201 Hays Street  
Tallahassee, FL 32301  
Phone: 850-558-1500

ACCOUNT NO. : I20000000195

REFERENCE : 139360 6383A

AUTHORIZATION :



COST LIMIT : \$125.00

ORDER DATE : October 18, 2021

ORDER TIME : 5:14 PM

ORDER NO. : 139360-005

CUSTOMER NO: 6383A

DOMESTIC FILING

NAME: INTIMATE SYNERGY, LLC

EFFECTIVE DATE:

ARTICLES OF INCORPORATION  
CERTIFICATE OF LIMITED PARTNERSHIP  
XX ARTICLES OF ORGANIZATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY  
XX PLAIN STAMPED COPY  
CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Eyliena Baker - EXT.

EXAMINER'S INITIALS: \_\_\_\_\_

**ARTICLES OF ORGANIZATION FOR  
INTIMATE SYNERGY, LLC  
A FLORIDA LIMITED LIABILITY COMPANY**

The undersigned, in forming a Florida Limited Liability Company ("Company") under the Florida Limited Liability Company Act, Chapter 605 of the Florida Statutes, hereby adopt the following Articles of Organization for such Company:

**ARTICLE I - Name**

The name of the Limited Liability Company is INTIMATE SYNERGY, LLC.

**ARTICLE II - Address**

The mailing address of the principal office of the Limited Liability Company is 14731 Eden Street, Fort Myers, Florida 33908, and the street address of the principal office of the Limited Liability Company is 14731 Eden Street, Fort Myers, Florida 33908.

**ARTICLE III - Duration**

The period of duration for the Limited Liability Company shall be from the time the Articles of Organization are filed, until December 31, 2099, except as otherwise provided in Article VI.

**ARTICLE IV - Management**

The Limited Liability Company is to be managed by one (1) manager and the name and address of such manager who is to serve as manager until his successors are elected and qualified are:

Ian J. Dewey  
14731 Eden Street  
Fort Myers, Florida 33908

**ARTICLE V - Admission of Additional Members**

The members may admit additional members upon the unanimous vote of all members, and payment towards capital of the sum required by said vote.

**ARTICLE VI - Members Rights to Continue Business**

The remaining members of the Limited Liability Company may continue the business upon the death, retirement, resignation, expulsion, bankruptcy, or dissolution of a member or the occurrence of any other event which terminates the continued membership of a member in the limited liability company, if the remaining members agree by vote.

2021 OCT 19 PM 4:00

FILED

**ARTICLE VII - Registered Agent**

The name and street address of the initial registered agent is:

Julian D. Gonzalez  
12661 New Brittany Blvd.  
Forty Myers, FL 33907

**ARTICLE VIII - Required Signature**



\_\_\_\_\_  
**Signature of a member or an authorized representative of a member.**

This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes.  
I am aware that any 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.



\_\_\_\_\_  
Typed or printed name of signee

### ACCEPTANCE BY REGISTERED AGENT

In pursuance of Chapter 605.0113 (2), Florida Statutes, the following is submitted, in compliance with said Act:

That INTIMATE SYNERGY, LLC, a Florida Limited Liability Company, desiring to organize under the laws of the State of Florida, with its principal office, as indicated in the Articles of Organization, at Fort Myers, County of Lee, State of Florida, has named Julian D. Gonzalez, 12661 New Brittany Blvd., Fort Myers, FL 33907, County of Lee, State of Florida, as its agent to accept service of process within this State.

### ACCEPTANCE BY REGISTERED AGENT:

Having been named as Registered Agent to accept service of process for the above stated LLC, at the place designated in this certificate, I hereby accept to act in this capacity, acknowledge that I am familiar with the obligations of this position and agree to comply with the provisions of said Act relative to keeping open said office.




JULIAN D. GONZALEZ,  
Registered Agent

FILED  
2021 OCT 19 PM 4:00  
CLERK OF COURT  
JULIAN D. GONZALEZ

STATE OF FLORIDA     )  
                                      )  
COUNTY OF LEE         )

The foregoing instrument was acknowledged before me by means of ☒ physical presence or  
☐ online notarization, this Oct 6<sup>th</sup>, 2021 by Ian Dewey, who  
is personally known to me or who has produced \_\_\_\_\_ as identification.



  
\_\_\_\_\_  
MAURA DELAGO  
Notary Public - State of Florida  
Commission No. GG 185448  
My Commission Expires: 02/13/2022