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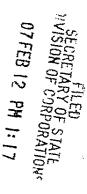
(Requestor's Name)
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## **COVER LETTER**

	Registration Se Division of Co						
SUBJEC	SUBJECT: ZENITH -UNIFORM ,LLC						
		(Name of Limite	d Liability Company)				
The enclo	osed Articles o	f Organization and fee(s) are s	ubmitted for filing.				
Please re	turn all corresp	ondence concerning this matte	er to the following:				
J.	ames R. F	Powell		ou o de video o o	***	2 <del>4</del> 1	
		(	Name of Person)				
Р	owell-Lini	c, L.L.C.	e e e e e e e e e e e e e e e e e e e	, : <del>, ;</del>	2	( <b></b>	
		(	Firm/Company)		07	E SE	
3	352 Perir	meter Rd.	<u> </u>		FEB 12		
			(Address)			FARE CREET	
P	alm City,	FL 34990		<u>.</u> <u></u>	PH	0890 1000 1000 1000	
		(City	/State and Zip Code)		**	STAI	
For furth	er information	concerning this matter, please	call:		7	<u> </u>	
James	R. Powell		at (772 , 283-229	12			
		of Person)	(Area Code & Daytime T				
Enclosed	d is a check fo	or the following amount:					
<b> √</b> \$125.0	00 Filing Fee	\$130.00 Filing Fee & Certificate of Status	\$155.00 Filing Fee & Certified Copy (additional copy is unclosed)	\$160.00 Filing Certificate of State Certified Copy (additional copy is enc	ıs &		
		Mailing Address	Street/Courier Addre	<b>55</b>			

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ZENITH - UNI FORM LLC  (Must end with the words "Limited Liability Company, "Lim	ited Company" or their abbreviation "L.C." or "L.C.")				
ARTICLE II - Address: The mailing address and street address of the p	principal office of the Limited Liability Company is:				
Principal Office Address:	Mailing Address:				
3352 Perimeter Rd. Palm City, FL 34990	3352 Perimeter Rd. Palm City, FL 34990				
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Reg business entity with an active Florida registration.)  The name and the Florida street address of the	istered Agent. You must designate an individual or another				
Powell Link I I C James I	P Powell MCP				
Powell-Link, L.L.C., James I					
Nam 3352 Perimeter Rd.	9.7				
Nam 3352 Perimeter Rd.	PM 1:				
Nam 3352 Perimeter Rd. Florida street ad	ddress (P.O. Box NOT acceptable)  FL 34990				

(CONTINUED) Page 1 of 2

Registered Agent's Signature (REQUIRED)

### ARTICLE IV- Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

"MGR" = Manager "MGRM" = Managing Member		
MGR	James R. Powell	
	3352 Perimeter Rd. Palm City, FL 34990	-
		• .
	07 F	101477
-	FEB -	UN UF
		CORF
(Use attachment if necessary)		ORA
effective date is listed, the date must	ne date of filing: (OPTIONA be specific and cannot be more than five business day.	s pi
0 days after the date of filing.)		
REQUIRED SIGNATURE:	_	

Signature of a member or an authorized representative of a member.

(In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

James R. Powell, MGR of Powell-Link, LLC

Typed or printed name of signee

#### Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent \$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)