L070000/6509

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	

Office Use Only



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COVER LETTER

TO:

TO:	Registration Se Division of Cor						
SUBJE	CT: ZODIA	C-UNIFORM ,LLC (Name of Limite	d Liability Compa	ny)		_	
The enc	losed Articles of	f Organization and fee(s) are s	ubmitted for filing				
Please n	eturn all corresp	ondence concerning this matte	er to the following:				
_	lames R. F	Powell					
		(Name of Person)		· · · · · · · · · · · · · · · · · · ·	•	_ ·
F	Powell-Link	, L.L.C.				0	JAIL IS
_			Firm/Company)			-11 -11	SION
3352 Perimeter Rd.		8	SE				
_	. ,		(Address)			2	-08F
F	Palm City,	FL 34990				<u>6</u>	CORPORATION
	· · · · · · · · · · · · · · · · · · ·	(City	/State and Zip Code))		F	
For furtl	ner information	concerning this matter, please	call:				<u></u>
Jame	James R. Powell at (772) 283-2292		2				
	(Name	of Person)	(Area Code	& Daytime T	elephone Number)		
Enclose	ed is a check fo	or the following amount:					
▼ \$125.	00 Filing Fee	\$130.00 Filing Fee & Certificate of Status	\$155.00 Fill Certified Copy (additional copy is	,	\$160.00 Filir Certificate of Sta Certified Copy (additional copy is	atus &	
		Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Registration Division of Clifton Bu 2661 Exec	of Corporatio	ns		

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:			
The name of the Limited Liability Compar	ny is:		
ZODIAC - UNIFORM ,LLC			,
(Must end with the words "Limited Liability Company,"	"Limited Company" or their abbreviation "LLC," or "L.C."	")	, * · · · · · · · · · · · · · · · · · ·
ARTICLE II - Address: The mailing address and street address of the mailing address and street address.	the principal office of the Limited Liability C	lompar	ıy is:
Principal Office Address:	Mailing Address:		
3352 Perimeter Rd.	3352 Perimeter Rd.		• <u>.</u>
Palm City, FL 34990	Palm City, FL 34990		r Fritze
	s <u>same and a second se</u>		
ARTICLE III - Registered Agent, Regis (The Limited Liability Company cannot serve as its own business entity with an active Florida registration.) The name and the Florida street address of	stered Office, & Registered Agent's Signate a Registered Agent. You must designate an individual or and the registered agent are:	are: other	NIC.
Powell-Link, L.L.C., Jan	Powell-Link, L.L.C., James R. Powell, MGR		250
	Name		圣光
3352 Perimeter Rd.		4 83	1,52 ±
Florida stre	eet address (P.O. Box NOT acceptable)	=	끊유
Palm City,	FL 34990	ထ္	25. 7.5. 7.5. 7.5. 7.5. 7.5. 7.5. 7.5. 7
City, S	State, and Zip		TIO.

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S..

Registered Agent's Signature (REQUIRED)

(CONTINUED) Page 1 of 2

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

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

"MGRM" = Managing Member	•	
MGR	James R. Powell	
	3352 Perimeter Rd.	-
	Palm City, FL 34990	<u> </u>
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	** <u>***** ***** *****</u>	3
		_ œ
		
(Use attachment if necessary)		
LE V: Effective date, if other than the da	tte of filing: (OPTIC	DNAL.
	pecific and cannot be more than five business	
days after the date of filing.)		
REQUIRED SIGNATURE:		
	^	
	63	
$\wedge \vee$	VI/	

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

that the facts stated herein are true.)

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

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)

Typed or printed name of signee