

L21000 468 700

(Requestor's Name)

(Address)

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(City/State/Zip/Phone #)

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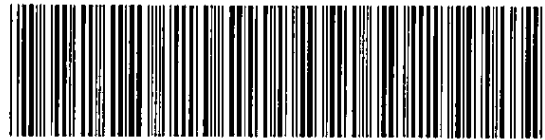
(Business Entity Name)

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CALLAHAN STATE, LLC

## CT CORP

**3458 Lakeshore Drive, Tallahassee, FL 32312**  
**850-656-4724**

**Date:** 11/01/2021

Acc#I20160000072

*en: c DW*

Name:	28530 US Hwy 19 LLC
Document #:	
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Amount: \$ **155.00**

Thank you!

ARTICLES OF ORGANIZATION  
OF  
28530 US HWY 19 LLC

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ARTICLE I - NAME

The name of this limited liability company is 28530 US HWY 19 LLC (the "Company").

ARTICLE II - PRINCIPAL OFFICE AND MAILING ADDRESS

The mailing address and street address of the principal office of the Company is 35 Center Street, Chicopee, Massachusetts 01013.

ARTICLE III - INITIAL REGISTERED OFFICE AND AGENT

The street address of the initial registered office of the Company is 1250 Hobbs Road, Auburndale, Florida 33823, and the name of the initial registered agent of the Company at that address is Patrick Gottschlicht.

ARTICLE IV - MANAGEMENT

The Company is a manager-managed limited liability company and the initial manager of the Company is Green Park Development LLC, 35 Center Street, Chicopee, Massachusetts 01013.



\_\_\_\_\_  
Patrick Gottschlicht, Authorized Representative

ACCEPTANCE OF REGISTERED AGENT

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 605, Florida Statutes.



\_\_\_\_\_  
Patrick Gottschlicht