

**L18000228293**

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

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To: Division of Corporations  
Fax Number : (350) 617-6381

From: Account Name : FASTKIT CORP  
Account Number : I20100000009  
Phone : (305) 599-0939  
Fax Number : (305) 592-9391

**\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\***

(Email Address: \_\_\_\_\_)

**FLORIDA LIMITED LIABILITY CO.  
Coral Way Garden, LLC**

Certificate of Status	0
Certified Copy	1
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Estimated Charge	\$155.00

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SEP 27 2018

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Coral Way Garden, LLC

(Must end with the words "Limited Liability Company," "L.L.C.," or "LLC.")

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

Principal Office Address:

Mailing Address:

1774 Nocatee Dr.

1774 Nocatee Dr.

Miami, FL 33133

Miami, FL 33133

ARTICLE III - Purpose

The purpose for which the corporation is organized is:

Supply of Replacement Parts for all types of Aircraft. Supply of Ground Support Equipment. Supply of Replacement Parts & Equipments for the Navy. Supply of Lubricant and Fuel. Repairs & Maintenance for components of Aircrafts and Ships. Any and all lawful business.

ARTICLE IV - Registered Agent, Registered Office, & Registered Agent's Signature:

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

The name and the Florida street address of the registered agent are:

Hac Wol Robaina

Name

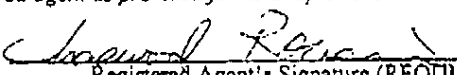
1774 Nocatee Dr.

Florida Street address (P.O. Box NOT acceptable)

Miami, FL 33133

City, State, and Zip

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 F.S..

  
Registered Agent's Signature (REQUIRED)

(CONTINUED)

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**ARTICLE V- Manager(s) or Managing Member(s):**

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

**Title:**

"MGR" = Manager

"MGRM" = Managing Member

**Name and Address:**

MGR

Hae Wol Robaina  
1774 Nocatee Dr.  
Miami, FL 33133

MGR

Oriando O. Robaina  
1774 Nocatee Dr.  
Miami, FL 33133

MGR

Oriando H. Robaina  
1774 Nocatee Dr.  
Miami, FL 33133


   
 

(Use attachment if necessary)

**ARTICLE VI:** Effective date, if other than the date of filing: \_\_\_\_\_  
(OPTIONAL)

(The effective date: 1) cannot be prior to nor more than 90 days after the date this document is filed by the Florida Department of State; AND 2) must be the same as the effective date listed in the attached Certificate of Conversion, if an effective date listed therein.)

**REQUIRED SIGNATURE:**

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

(In accordance with section 605.0203 Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true. 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.)

Hae Robaina  
Typed or printed name of signer

SECRETARY OF STATE  
PALM HARBOR, FLORIDA

2018 SEP 26 AM 11:29

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