

LD000085537

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

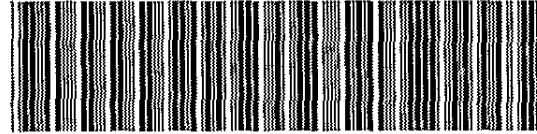
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DB

**TRANSMITTAL LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Smart Buy Kitchen, LLC <sup>of Cape Coral</sup>  
(Name of Limited Liability Company)

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Daniel O. Cuenya  
(Name of Person)

Cuenya Construction  
(Firm/Company)

1791 Trade Center Way Suite "A"  
(Address)

Naples, FL  
(City/State and Zip Code)

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DIVISION OF  
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For further information concerning this matter, please call:

Daniel Cuenya at (239) 825-9350  
(Name of Person) (Area Code & Daytime Telephone Number)

**STREET ADDRESS:**  
Registration Section  
Division of Corporations  
409 E. Gaines Street  
Tallahassee, Florida 32399

**MAILING ADDRESS:**  
Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, Florida 32314

**ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY**

**ARTICLE I - Name:**

**Smart Buy Kitchen of Cape Coral, LLC**

**ARTICLE II - Address:**

**Principal Office Address:**

**1311 Del Prado Blvd - Suite E  
Cape Coral, FL 33990**

**Mailing Address:**

**(same)**

**ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:**

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

**Daniel O. Cuenya**

Name

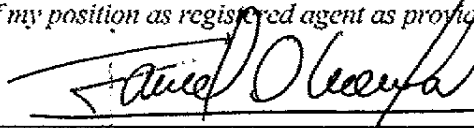
**6440 Sable Ridge Ln**

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

**Naples, FL 34109**

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 608, F.S..*



Registered Agent's Signature

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(CONTINUED)

**ARTICLE IV- 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:**

**MGRM** \_\_\_\_\_

**60% Daniel O. Cuenya**

**6440 Sable Ridge Ln  
Naples, FL 34109**

**MEMBER** \_\_\_\_\_

**20% Trent Hillaert**

**3270 Bermuda Isle Cr. 619A  
Naples, FL 34109**

**MEMBER** \_\_\_\_\_

**10% Richard Oliva**

**2030 NW 5th Terr  
Cape Coral, FL 33993**

**MEMBER** \_\_\_\_\_

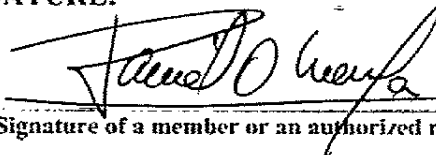
**10% Victor Treissa**

**3730 White Blvd.  
Naples, FL 34117**

(Use attachment if necessary)

**NOTE: An additional article must be added if an effective date is requested**

**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.)

**DANIEL O. CUENYA**

Typed or printed name of signee

**Filing Fees:**

**\$100.00 Filing Fee for Articles of Organization**  
**\$ 25.00 Designation of Registered Agent**  
**\$ 30.00 Certified Copy (Optional)**  
**\$ 5.00 Certificate of Status (Optional)**

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