

2025 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L20000148501

Entity Name: SLP SPEAK 2 ME SPEECH THERAPY, LLC

Current Principal Place of Business:

274 WILSHIRE BLVD
SUITE 269
CASSELBERRY, FL 32707

Current Mailing Address:

1799 LAKELET LOOP
OVIEDO, FL 32765

FEI Number: 85-1332113

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

HALL, CARLA C
1799 LAKELET LOOP
OVIEDO, FL 32765 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title AMBR
Name HALL, CARLA C
Address 1799 LAKELET LOOP
City-State-Zip: OVIEDO FL 32765

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: CARLA HALL

OWNER

05/01/2025

Electronic Signature of Signing Authorized Person(s) Detail

Date