

**2025 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L23000140158

**Entity Name:** SPEED DENTAL, LLC

**Current Principal Place of Business:**

6112 PARKSET DR  
LITHIA, FL 33547

**Current Mailing Address:**

6112 PARKSET DR  
LITHIA, FL 33547 US

**FEI Number:** 92-3190925

**Certificate of Status Desired:** Yes

**Name and Address of Current Registered Agent:**

ORLANDI, MAURICIO A  
6112 PARKSET DR  
LITHIA, FL 33547 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 ORLANDI, MAURICIO A  
Address 6112 PARKSET DR  
City-State-Zip: LITHIA FL 33547

Title AMBR  
Name ORLANDI, CARLA R  
Address 6112 PARKSET DR  
City-State-Zip: LITHIA FL 33547

Title AMBR  
Name FLUIT, CAROLINA A  
Address 1602 NEWBERGER ROAD  
City-State-Zip: LUTZ FL 33549

Title AMBR  
Name SALLES, FELIPE  
Address 803 SW 118TH AVE  
City-State-Zip: PEMBROKE PINES FL 33025

Title MGR  
Name SALLES, FELIPE  
Address 803 SW 118TH AVE  
City-State-Zip: PEMBROKE PINES FL 33025

*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:** MAURICIO ORLANDI

**OWNER**

**04/29/2025**

Electronic Signature of Signing Authorized Person(s) Detail

Date