### 2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L19000272888

Entity Name: 2126 GROUP, LLC

# **Current Principal Place of Business:**

17107 N BAY RD APT 211 SUNNY ISLES BEACH, FL 33160

# **Current Mailing Address:**

17107 N BAY RD APT 211 SUNNY ISLES BEACH, FL 33160 US

# FEI Number: 84-3753626

### Name and Address of Current Registered Agent:

MEDONE SPARROW, ALAN 17107 N BAY RD APT 211 SUNNY ISLES BEACH, FL 33160 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.

The above harred entity submits this statement for the purpose of changing its registered once of registered agent, or both, in the State of Pionda.			
SIGNATURE	: ALAN MEDONE SPARROW		01/10/2022
	Electronic Signature of Registered Agent		Date
Authorized Person(s) Detail :			
Title	MGR	Title	MGR
Name	MEDONE SPARROW, ALAN	Name	TRICHILO, JOSE GABRIEL
Address	17107 N BAY RD	Address	444 BRICKELL AVENUE, SUITE 828
City-State-Zip:	APT 211 SUNNY ISLES BEACH FL 33160	City-State-Zip:	MIAMI FL 33131
Title I	DIRECTOR Title Name	Title	DIRECTOR
		Name	MEDONE, JOSE
Name	SPARROW, ANDREA		
Address	17107 N BAY RD	Address	17107 N BAY RD APT 211
City-State-Zip:	APT 211 SUNNY ISLES BEACH FL 33160	City-State-Zip:	SUNNY ISLES BEACH FL 33160

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: ALAN MEDONE SPARROW

MGR

Electronic Signature of Signing Authorized Person(s) Detail

Certificate of Status Desired: Yes