

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L16000208568

**Entity Name:** 292 GROUP LLC

**Current Principal Place of Business:**

8200 NW 41ST STREET  
SUITE 270  
DORAL, FL 33166

**Current Mailing Address:**

8200 NW 41ST STREET  
SUITE 270  
DORAL, FL 33166 US

**FEI Number:** 81-4430773

**Certificate of Status Desired:** No

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

PADRON, DIEGO E  
8200 NW 41ST STREET  
SUITE 270  
DORAL, FL 33166 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           | MGRM                             | Title           | MGR                              |
| Name            | PADRON, DIEGO                    | Name            | TORRES, NORBERTO                 |
| Address         | 8200 NW 41ST STREET<br>SUITE 270 | Address         | 8200 NW 41ST STREET<br>SUITE 270 |
| City-State-Zip: | DORAL FL 33166                   | City-State-Zip: | DORAL FL 33166                   |

*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:** DIEGO PADRON

**MGRM**

**02/13/2024**

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date