

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L14000048083

**Entity Name:** ARCADIA III LLC

**Current Principal Place of Business:**

C/O 1430 S. DIXIE HWY  
SUITE 321  
CORAL GABLES, FL 33146

**Current Mailing Address:**

C/O 1430 S. DIXIE HWY.  
SUITE 321  
CORAL GABLES, FL 33146 US

**FEI Number:** APPLIED FOR

**Certificate of Status Desired:** No

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

MICHAEL ORTIZ P.A.  
1430 S DIXIE HWY.  
SUITE 321  
CORAL GABLES, FL 33146 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:** MICHAEL ORTIZ

04/11/2024

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title MGRM  
Name VALDES, MANUEL  
Address C/O 1430 S DIXIE HWY. SUITE 321  
City-State-Zip: CORAL GABLES FL 33146

Title MGRM  
Name MONTALVA, ROSA  
Address C/O 1430 S DIXIE HWY. SUITE 321  
City-State-Zip: CORAL GABLES FL 33146

Title MGRM  
Name VALDES, REGINA  
Address C/O 1430 S DIXIE HWY. SUITE 321  
City-State-Zip: CORAL GABLES FL 33146

Title AR  
Name ORTIZ, MICHAEL  
Address 1430 S DIXIE HWY  
SUITE 321  
City-State-Zip: CORAL GABLES FL 33146

*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:** MICHAEL ORTIZ

AR

04/11/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date