

**2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L16000120284

**FILED**  
**Feb 15, 2021**  
**Secretary of State**  
**6036746053CC**

**Entity Name:** WYNWOOD VENTURES III LLC

**Current Principal Place of Business:**

2610 NORTH MIAMI AVENUE  
MIAMI, FLORIDA, FL 33127

**Current Mailing Address:**

P.O. BOX 370428  
MIAMI, FLORIDA, FL 33137 US

**FEI Number:** 81-3017095

**Certificate of Status Desired:** No

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

FERRERA, SANDRA M P.A.  
396 ALHAMBRA CIRCLE  
NORTH TOWER, 14TH FLOOR  
CORAL GABLES, FL 33134 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             | Title           | AMBR            |
| Name            | GARCIA, ALBERT   | Name            | GARCIA, ALBERTO |
| Address         | P.O. BOX 370428  | Address         | P.O. BOX 370428 |
| City-State-Zip: | MIAMI FL 33137   | City-State-Zip: | MIAMI FL 33137  |
|                 |                  |                 |                 |
| Title           | AMBR             |                 |                 |
| Name            | GARCIA, MERCEDES |                 |                 |
| Address         | P.O. BOX 370428  |                 |                 |
| City-State-Zip: | MIAMI FL 33137   |                 |                 |

*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:** ALBERTO GARCIA

AMBR

02/15/2021

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

\_\_\_\_\_  
Date