

**2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L16000120284

**FILED**  
**Mar 25, 2019**  
**Secretary of State**  
**5330430110CC**

**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.  
500 S. DIXIE HIGHWAY  
SUITE 304  
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:**

\_\_\_\_\_  
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:** ALBERT GARCIA

AMBR

03/25/2019

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

\_\_\_\_\_  
Date