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.

Electronic Signature of Signing Authorized Person(s) Detail

# 2021 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

#### DOCUMENT# M13000007547

#### Entity Name: ORLANDO LEASED HOUSING ASSOCIATES LP III, LLC

## Current Principal Place of Business:

2905 NORTHWEST BOULEVARD SUITE 150 PLYMOUTH, MN 55441

## **Current Mailing Address:**

2905 NORTHWEST BOULEVARD SUITE 150 PLYMOUTH, MN 55441 US

## FEI Number: 46-4165298

## Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 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

## Authorized Person(s) Detail :

Title	MANAGER	Title	MANAGER
Name	SWEEN, PAUL R.	Name	MOORHOUSE, MARK S.
Address	2905 NORTHWEST BOULEVARD SUITE 150	Address	2905 NORTHWEST BOULEVARD SUITE 150
City-State-Zip:	PLYMOUTH MN 55441	City-State-Zip:	PLYMOUTH MN 55441
Title			
The	MANAGER		
Name	MANAGER BRACHMAN, ARMAND E.		

Certificate of Status Desired: No

FILED Mar 30, 2021 Secretary of State 6279535236CC

> 03/30/2021 Date

Date

MANAGER