## FORM 4

# UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

OMB APPR	OVAL	
OMB Number:	3235-0	287
Estimated average	burden	
ours per respons	e	0.5

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

#### STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

(Print or Ty	pe Response	s)																	
1. Name and Address of Reporting Person* GLAZER CAPITAL, LLC					2. Issuer Name and Ticker or Trading Symbol Andina Acquisition Corp. III [ANDA]							5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director X 10% Owner							
(Last) (First) (Middle) 250 WEST 55TH STREET, SUITE 30A					3. Date of Earliest Transaction (Month/Day/Year) 07/24/2020							Office	er (give title belo	ow)	Other (spec	ify belo	w)		
(Street) NEW YORK, NY 10019				4. If Amendment, Date Original Filed(Month/Day/Year)							6. Individual or Joint/Group Filing(Check Applicable Line) Form filed by One Reporting Person X_ Form filed by More than One Reporting Person								
(City		(State)		(Zip)			T	able I	- Noi	n-D	erivative	Securitie	s Acq	uired, Disp	osed of, or l	Beneficially	Owned		
(Instr. 3) Date		Date Ex (Month/Day/Year) ar		A. Deemed Execution Date, if ny Month/Day/Year)		Code		1	4. Securities Acquired (or Disposed of (D) (Instr. 3, 4 and 5)			5. Amount of Securities Beneficially Owned Foll Reported Transaction(s) (Instr. 3 and 4)		Following	Form: Direct (	nership of I m: Ber ect (D) Ow	Nature Indirect eneficial wnership		
								Code	e	V	Amoun	(A) or (D)	Prio	ce	(1		or Indire (I) (Instr. 4		
Ordinary value	Shares, no	o par	07/24	-/2020				J <sup>(2)</sup>	)		1,200,0	00 D	\$ 10.2	.23 656,649 I		I	F	ee ootnote	
Reminder:	Report on a s	separate line	e for eacl	n class of secu	rities t	eneficial	lly o	owned o	direct	tly o	or indirectl	ly.		•				<u>'</u>	
							-			СО	ntained i	n this fo	rm a	re not req	ction of inf uired to res I OMB con	spond unle	ess	EC 14	74 (9-02)
											Disposed ns, conver			ally Owned					
1. Title of Derivative Security (Instr. 3)  2. Conversion Date (Month/Date) Price of Derivative Security			3A. Deemed Execution Da any	4. Transaction Code Year) (Instr. 8)		tion	5. Number		6. an (N	6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Ar Ur Se	Title and nount of iderlying curities astr. 3 and		9. Number of Derivative Securities Beneficially Owned Following Reported Transaction ((Instr. 4)	Own Form y Deri Secu Dire or In	n of vative rity: ct (D) direct	(Instr. 4)	
						Code	V	(A)	(D)		ate xercisable	Expiration Date	on Ti	Amount or Number of Shares					

### **Reporting Owners**

B 41 0 V 4	Relationships						
Reporting Owner Name / Address	Director	10% Owner	Officer	Other			
GLAZER CAPITAL, LLC 250 WEST 55TH STREET SUITE 30A NEW YORK, NY 10019		X					
GLAZER PAUL J 250 WEST 55TH ST SUITE 30A NEW YORK, NY 10019		X					

#### **Signatures**

Paul J. Glazer	07/30/2020
**Signature of Reporting Person	Date

#### **Explanation of Responses:**

- \* If the form is filed by more than one reporting person, see Instruction 4(b)(v).
- \*\* Intentional misstatements or omissions of facts constitute Federal Criminal Violations. See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).
  - The securities reported herein are held by certain funds and accounts to which Glazer Capital, LLC, a Delaware limited liability company, serves as investment manager. Mr. Dayl J. Glazer serves as the Managing Member of Glazer Capital, LLC, Each of Glazer Capital, LLC, and Mr. Paul J. Glazer disclaims beneficial ownership of the securities.
- (1) Paul J. Glazer serves as the Managing Member of Glazer Capital, LLC. Each of Glazer Capital, LLC and Mr. Paul J. Glazer disclaims beneficial ownership of the securities reported herein except to the extent of such Reporting Person's pecuniary interest therein.
- (2) Redemption

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.