



State of Rhode Island

Department of State - Business Services Division

STAMP

Annual Report for the year: 2023
 Limited Liability Company

- Filing period: February 1 - May 1
 → Filing Fee: \$50.00
 → Penalty: Additional \$25.00 fee if form is not filed by May 31.

APR 10 2023

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|---|--|---|--------------------|
| 1. Entity ID Number 001729246 | | 2. Exact name of the Limited Liability Company Sylvan Street Newport LLC | |
| 3. NAICS Code 531390 | | 4. Brief description of the character of business conducted in Rhode Island own real estate | |
| 5. State of Formation DE | | | |
| 6. Principal Office Address 655 N AIA | | City Jupiter | State FL |
| | | Zip 33477 | |
| 7. Mailing Address of Limited Liability Company and Name or Title of Contact Person | | | |
| Contact Name Zachary Kavanaugh | | Contact Title Manager | |
| Street Address 631 US Highway 1 Ste 309 | | City North Palm Beach | State FL |
| | | Zip 33408 | |
| 8. The Resident Agent information currently of record with the RI Department of State is accurate. Changes require filing Form 642. | | | |
| <i>Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.</i> | | | |
| Name of Authorized Person ZACHARY J KAVANAUGH | | Date 3/30/23 | |
| Signature of Authorized Person <i>[Signature]</i> | | | |

MAIL TO:

Division of Business Services

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