

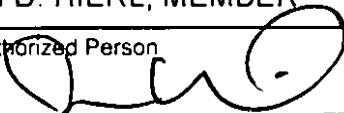


State of Rhode Island
Department of State - Business Services Division

**FILED
STAMP**
MAY 04 2024
BY W/104
SECRETARY OF STATE
OR

Annual Report for the year: 2024
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.

1. Entity ID Number 001684787		2. Exact name of the Limited Liability Company 33 SYLVAN, LLC	
3. NAICS Code 531390		4. Brief description of the character of business conducted in Rhode Island THE PURCHASE, HOLDING, LEASING AND SALE OF RESIDENTIAL, COMMERCIAL AND MIXED PARCELS OF REAL ESTATE.	
5. State of Formation RHODE ISLAND			
6. Principal Office Address 130 TOWER HILL ROAD		City NORTH KINGSTOWN	State RI
		Zip 02852	
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person			
Contact Name SKYCAP, LLC		Contact Title MANAGER	
Street Address 67 FAIRMONT AVENUE		City STAMFORD	State CT.
		Zip 06906	
8. The Resident Agent information currently of record with the RI Department of State is accurate. Changes require filing Form 642.			
9 <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 JONATHAN D. HIERL, MEMBER		Date 4/25/24	
Signature of Authorized Person 			

MAIL TO:
Division of Business Services
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