

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L20000101736

**Entity Name:** 5173 SYLVESTER LLC

**Current Principal Place of Business:**

9 MCPHERSON LANE  
BELLE MEAD, NJ 08502

**Current Mailing Address:**

9 MCPHERSON LANE  
BELLE MEAD, NJ 08502 US

**FEI Number:** NOT APPLICABLE

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

BROWN, MICHAEL J  
4952 POND RIDGE DR.  
RIVERVIEW, FL 33578 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 MGR  
Name XU, KAN  
Address 9 MCPHERSON LANE  
City-State-Zip: BELLE MEAD NJ 08502

*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:** KAN XU

**OWNER**

**02/18/2024**

Electronic Signature of Signing Authorized Person(s) Detail

Date