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STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS
Office of the Secretary of State - Division of Business Services
148 W. River Street, Providence, Rhode Island 02904-2615
Phone: (401) 222-3040 ~ **Email:** corporations@sos.ri.gov ~ **Website:** www.sos.ri.gov

LIMITED LIABILITY COMPANY ANNUAL REPORT FOR THE YEAR 2014

Filing Period: September 1 - November 1 • **This report must be typed or printed legibly.**
Filing Fee: $50.00 • **FAILURE TO FILE THIS REPORT BY DECEMBER 1 WILL RESULT IN A $25.00 PENALTY FEE.**

1. Entity ID No.	2. Exact name of the limited liability company		
513888	EMSTER LLC		
3. State of Formation	4. Brief description of the character of business conducted in Rhode Island		
RI	RENTAL PROPERTY		
5. Principal office address	City	State	Zip
18 Leela Lane	Rochdale	MA	01542
6. MAILING ADDRESS OF LIMITED LIABILITY COMPANY AND NAME OR TITLE OF CONTACT PERSON:			
Contact Name	Contact Title		
Kenneth Feidman	50% Shareholder		
Street Address	City	State	Zip
18 Leela Lane	Rochdale	MA	01542
7. LIST ALL MANAGERS (NAMES AND ADDRESSES) OF THE LIMITED LIABILITY COMPANY, IF APPLICABLE - DO NOT LIST MEMBERS ("X" BOX FOR ATTACHMENT) ☐			
Manager Name	Manager Name		
Street Address	Street Address		
City / State / Zip	City		
Manager Name	Manager Name		
Street Address	Street Address		
City / State / Zip	City / State / Zip		
8. RESIDENT AGENT IN RHODE ISLAND			
This information is currently of record in the Office of the Secretary of State. Changes require filing Form 642.			

Brenda Cottiv
405 Wilson Trail
Pascoag, RI 02859

File Date _____ FILED
Check No _____ MAY 04 2015
By: _____
FOR SECRETARY OF STATE USE ONLY BY 1371

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.

Kenneth Feidman 4-28-15
Signature of Authorized Person Date

Kenneth Feidman
Print or Type Name of Authorized Person

120504-9-1011468