

Information submitted via Top Hat Plan Statement Online Filing System to U. S.
Department of Labor under 29 CFR 2520.104-23

Date Completed: 6/16/2023 1:12 PM EST

Confirmation Number: 11691
Amended Confirmation Number:

Employer Information

Name: Agentis Plumbing LLC
Address: 2678 Butztown Rd
City: Bethlehem
State: PA
Zip Code: 18017

Plan Administrator Information

Name: Nathaniel Agentis
Address: 838 N Clewell St
City: Bethlehem
State: PA
Zip Code: 18015
Phone: 4846260243
Email: Nate@agentisplumbing.com

Plan Information

Employer maintains the plan or plans below primarily for the purpose of providing deferred compensation for a select group of management or highly compensated employees.

ID:1	Plan Name: Agentis Plumbing LLC	Number of Employees: 56
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Additional Information:



U. S. Department of Labor
Employee Benefits Security Administration
Washington, DC 20210

This message confirms that the Department of Labor's (DOL's) Employee Benefits Security Administration (EBSA) has received the filing of your Top Hat Plan Statement. The confirmation code for your filing is 11691. When correcting errors to your filing, please use this code in your amended statement. This communication does not mean that DOL has made a determination that you are eligible to file under DOL regulation 29 CFR 2520.104-23.