

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

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Confirmation Number: 16864

Amended Confirmation Number:

Employer Information

Name: Foogmeela Enterprises, LLC
Address: N14W23833 Stone Ridge Dr., Suite 410
City: Waukesha
State: WI
Zip Code: 53185

Plan Administrator Information

Name: Foogmeela Enterprises, LLC
Address: N14W23833 Stone Ridge Dr., Suite 410
City: Waukesha
State: WI
Zip Code: 53185
Phone: 2629551603
Email: chris.fugman@nm.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:	Supplemental Employee Retirement Plan	Number of Employees: 1
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Additional Information:

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



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 16864. 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.