RI SOS Filing Number: 202224149390 Date: 10/17/2022 12:36:00 PM



State of Rhode Island

## **Department of State - Business Services Division**

RECEIVED R.I. DEPT. OF STATE BUS SVCS DIV

Annual Report for the year: 2021

2022 OCT 17 PM 12: 35

**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	2. Exact name of the Limited Liability Company ATRIUM PAYROLL SERVICES LLC			
3. NAICS Code 541214	Brief description of the character of business conducted in Rhode Island     EMPLOYER OF RECORD			
5. State of Formation NEW YORK				
6. Principal Office Address 387 PARK AVE SOUTH; 3RD FL		City NEW YORK	State NY	Zip 10016
7. Mailing Address of Limiter	Liability Company and Name or T	itle of Contact Person		
Contact Name KEVIN MILLER		Contact Title DIRECTOR OF CORPORATE ACCTG.		
Street Address 625 LIBERTY AVENUE; STE 200		City PITTSBURGH	State PA	<sup>Zip</sup> 15222
8. The Resident Agent Inform	nation currently of record with the R	RI Department of State is accurate	. Changes require	filing Form 642.
Under penalty of perjury, I	declare and affirm that I have ex- atements contained herein are tri	amined this report, including a	ny accompanying	g schedules and
Name of Authorized Person KEVIN MILLER			Date 10/17/2022	
Signature of Authorized Pers	wh h			

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BY ZAGE

MAIL TO:

**Division of Business Services** 148 W. River Street, Providence, Rhode Island 02904-2615

Phone: (401) 222-3040 Website: www.sos.ri.gov