		of Rhode Island le Secretary of		Fee: \$50.00
		Of Business Servi		
		W. River Street		
	Provider	nce RI 02904-261	5	
7636	(40	01) 222-3040		
Limited Liability Annual Report Filing Period: Febr				
refusing to file its a	n R.I.G.L. 7-16-66(d), each lim annual report within thirty (30) •66(b&c)) is subject to a penalt	days after the tim		y
ANNUAL REPORT	T YEAR: <u>2023</u>			
1. ID No. <u>0017</u>	736905			
2. Exact Name of	f the Limited Liability Compa	ny <u>Astrix Technol</u>	<u>logy, LLC</u>	
3. State of Forma	ation			
State: <u>DE</u>				
	AF			
-	NAICS Code that best describ of codes <u>here.</u> More informati			
<u>561320</u>				
4. Brief Descriptie Island	on of the Character of the Bu	siness Which is <i>I</i>	Actually Condu	icted in Rhode
STAFFING TEM	1PORARY HELP SERVICES	<u>}</u>		
5. Principal Offic	e Address			
No. and Street:	<u>125 HALF MILE ROAD</u> <u>SUITE 200</u>			
City or Town:	<u>RED BANK</u>	State: <u>NJ</u>	Zip: <u>07701</u>	Country: <u>USA</u>
6. Mailing Addres	ss of Limited Liability Compa	ny and Name or T	itle of Contact	Person:
Contact Name: C No. and Street:	Contact Title: <u>125 HALF MILE ROAD</u> SUITE 200			

7. RESIDENT AGENT IN RHODE ISLAND - DO NOT ALTER Changes Require Filing of Form 642 - R.I.G.L. 7-16-11

CORPORATION SERVICE COMPANY 222 JEFFERSON BOULEVARD, SUITE 200 WARWICK , RI 02888

8. This report must be executed by an authorized person pursuant to R.I.G.L. 7-16-66 (b).

Signed this 26 Day of February, 2023 at 3:25:27 PM by the authorized person. *This electronic signature of the individual or individuals signing this instrument constitutes the affirmation or acknowledgement of the signatory, under penalties of perjury, that this instrument is that individual's act and deed or the act and deed of the company, and that the facts stated herein are true, as of the date of the electronic filing, in compliance with R.I. Gen. Laws § 7-16.*

By DALE CURTIS

Signature of Authorized Person

Form No. 632 Revised 09/07

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