



0004699876

**STATE OF IDAHO***Office of the secretary of state, Lawrence Denney***STATEMENT OF DISSOLUTION LIMITED LIABILITY COMPANY**

Idaho Secretary of State  
PO Box 83720  
Boise, ID 83720-0080  
(208) 334-2301  
Filing Fee: \$0.00

*For Office Use Only***-FILED-**

File #: 0004699876

Date Filed: 4/28/2022 8:39:48 AM

|                                                                                                                                                                                                         |  |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|
| Statement of Dissolution (LLC or PLLC)                                                                                                                                                                  |  |
| Select one: Standard, Expedited or Same Day Service (see descriptions below)      Standard (filing fee \$0)                                                                                             |  |
| 1. The name of the limited liability company is:<br>J. D. ROOFING & SIDING L.L.C.<br>The file number of this entity on the records of the Idaho Secretary of State is:      0000069965                  |  |
| 2. The date the certificate of organization was originally filed is:<br>04/05/2002                                                                                                                      |  |
| 3. Other information concerning the dissolution (optional):                                                                                                                                             |  |
| 4. Effective Date<br>The dissolution shall be effective      when filed with the Secretary of State.                                                                                                    |  |
| 5. Name and address to return acknowledgment copy of this form to (if submitted by mail):<br>Name of individual or organization      Jeff L Davies<br>Address      4636 E 150 N<br>RIGBY, ID 83442-5915 |  |
| The Statement of Dissolution must be signed by a manager, member, or authorized person.<br><br><i>Jeff L Davies</i> <u>04/28/2022</u><br>Sign Here      Date<br><br>Job Title: Manger                   |  |

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