No. W 114716	Du	Due no later than Jun 30, 2018			2. Registered Agent and Address (NO PO BOX)			
Return to:		Annual Report Form		MICHAEL LAPOINTE				
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080	POINT ROOFI MICHAEL LA	1. Mailing Address: Correct in this box if needed. POINT ROOFING & RESTORATION LLC MICHAEL LA POINTE 4906 W OVERLAND RD BOISE ID 83705 USA		10789 W SANDPIPER ST BOISE ID 83709				
	BOISE ID 83			3. New Registered Agent Signature:*				
NO FILING FEE IF RECEIVED BY DUE DATE	USA							
4. Limited Liability Companies: Er	ter Names and Addresse	es of at least one Member or Manager.						
Office Held Name		Street or PO Address	City	State	Country	Postal Code		
MEMBER MECH	IELLA LA POINTE	10789 W SANDPIPER ST	BOISE	ID	USA	93709		
MEMBER MICHAEL LA POINTE		10789 W SANDPIPER ST	BOISE	ID	USA	83709		
5. Organized Under the Laws of:	6. Annual Repor	t must be signed.*						
ID	Signature: Mi	Signature: Michael La Pointe		Date: 04/23/2018				
W 114716	Name (type o	Name (type or print): Michael La Pointe		Title: Owner				
Processed 04/23/2018	* Electronically provided signatures are accepted as original signatures.							