

No. W 47151	Due no later than Feb 28, 2015 Annual Report Form	2. Registered Agent and Address (NO PO BOX)	
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE	1. Mailing Address: Correct in this box if needed. ALPHA ROOFING & CONSTRUCTION LLC JUSTIN E BROMGARD PO BOX 1625 EAGLE ID 83616	JUSTIN BROMGARD 1138 N TORREY PINES AVE EAGLE 83616	
		3. <u>New</u> Registered Agent Signature:*	
4. Limited Liability Companies: Enter Names and Addresses of at least one Member or Manager.			
Office Held	Name	Street or PO Address	City State Country Postal Code
MANAGER	JUSTIN BROMGARD	4119 N CHRISTINE ST	BOISE ID 83704
MANAGER	EILEEN M BROMGARD	8425 W. MIDLAND DR.	BOISE ID USA 83704
5. Organized Under the Laws of: ID W 47151	6. Annual Report must be signed.* Signature: eileen bromgard Name (type or print): eileen bromgard		Date: 12/18/2014 Title: Manager
Processed 12/18/2014		* Electronically provided signatures are accepted as original signatures.	