

# CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

Title 30, Chapters 21 and 25, Idaho Code

Base Filing fee: \$100.00 typed, \$120 not typed

Complete and submit the application in duplicate.

For Office Use Only

**-FILED-**

File #: 0003331776

Date Filed: 10/4/2018 9:29:00 AM

1. The name of the limited liability company is:

Slice of You LLC

(Remember to include the words "Limited Liability Company," "Limited Company," or the abbreviations L.L.C., LLC, or LC)

2. The complete street and mailing addresses of the principal office is:

1024 16th Ave. Suite A

Lewiston, ID 83501

(Direct Address)

(Mailing Address, if different)

3. The name and complete street address of the registered agent:

Samuel Swarner

1024 16th Ave Ste A

Lewiston, ID 83501

(Name)

(Address)

4. The name and address of at least one governor of the limited liability company:

Samuel Swarner

1024 16th Ave Ste A

Lewiston, ID 83501

(Name)

(Address)

Nichole Swarner

1024 16th Ave Ste A

Lewiston, ID 83501

(Name)

(Address)

(Name)

(Address)

(Name)

(Address)

5. Mailing address for future correspondence (annual report notices):


1024 16th Ave Ste A

Lewiston, ID 83501

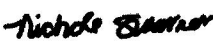
(Address)

Signature of organizer(s).

Printed Name: Samuel Swarner

Signature: 

Printed Name: Nichole Swarner

Signature: 

Secretary of State use only