







STATE OF IDAHO Office of the secretary of state, Phil McGrane **CERTIFICATE OF ORGANIZATION LIMITED** LIABILITY COMPANY

Idaho Secretary of State PO Box 83720 Boise, ID 83720-0080 (208) 334-2301 Filing Fee: \$100.00

For Office Use Only

-FILED-

File #: 0006083812

Date Filed: 1/29/2025 2:43:56 PM

Certificate of Organization Limited Liability Company Select one: Standard, Expedited or Same Day Sedescriptions below)	ervice (see Standard (filing fee \$100)
1. Limited Liability Company Name	
Type of Limited Liability Company	Limited Liability Company
Entity name	Slice House Pizzeria LLC
2. The complete street address of the principal office is:	
Principal Office Address	13725 SAGE GROUSE PLACE BOISE, ID 83714
3. The mailing address of the principal office is:	
Mailing Address	13725 N SAGE GROUSE PL BOISE, ID 83714-3001
4. Registered Agent Name and Address	
Registered Agent	REGISTERED AGENTS INC Commercial Registered Agent
	Physical Address
	784 S CLEARWATER LOOP STE R POST FALLS, ID 83854
	Mailing Address
	784 S CLEARWATER LOOP STE R POST FALLS, ID 83854
☑ I affirm that the registered agent appointed have	as consented to serve as registered agent for this entity.
5. Governors	
Name	Address
samuel james walker	13725 SAGE GROUSE PLACE BOISE, ID 83714
Signature of Organizer:	
samuel james walker	01/29/2025
Sign Here	Date