## FILED EFFECTIVE



## CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY 08 0CT 10 AM 8: 54

(Instructions on back of application)

SECRETARY OF STATE STATE OF IDAHO

1.	The name of the limited liability company is:		
	HC Management, LLC		
2.	The complete street and mailing addresses of the initial designated/principal office:  104 North Bridge Street, Suite 104, St. Anthony, Idaho 83445  (Street Address)		
	(Street Address)		
	(Mailing Address, if different than street address)		
3.	The name and complete street add	e name and complete street address of the registered agent:	
	Paul Clement Hill (Name)	104 North Bridge St. Ste 104, St. Anthony, Idaho 83445 (Street Address)	
4.	The name and address of at least o	one member or manager of the limited liability	
	<u>Name</u>	<u>Address</u>	
	Paul Clement Hill	104 North Bridge St. Ste 104, St. Anthony, Idaho 83445	
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5.	Mailing address for future correspo	ndence (annual report notices):	
	PO Box 586, St. Anthony, Idaho 83445		
6.	Future effective date of filing (option	nal):	
-	nature of organizer(s). (An organizer is	a member, or is	
acti	ng in behalf of a member or members).	Secretary of State use only	
Signature // mthrow			
Тур	ped Name: Paul Clement Hill		
		CK: 1231 CT: 214046 BH: 1139694   1 6160.60 = 1880.60 ORGAN LLC	
Signature 10/10/2008 05 = 0:  CK: 1231 CT: 214946 BH: 11396			
Typed Name:   \$\frac{1}{6} \text{ 1 & 188.80} = \text{ 160.60} \text{ ORGAN LLC & }			