



# CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

FILED EFFECTIVE

09 APR -2 AM 8: 26

(Instructions on back of application)

SECRETARY OF STATE  
STATE OF IDAHO

1. The name of the limited liability company is:

Healthcare Investments, LLC

2. The complete street and mailing addresses of the initial designated/principal office:

1300 E State Street, Suite 103 Eagle Idaho 83616

(Street Address)

(Mailing Address, if different than street address)

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

Bart Cochran

1300 E State Street, Suite 103 Eagle Idaho 83616

(Name)

(Street Address)

4. The name and address of at least one member or manager of the limited liability company:

**Name**

**Address**

Bart Cochran

1300 E State Street, Suite 103 Eagle Idaho 83616

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

1300 E State Street, Suite 103 Eagle Idaho 83616

6. Future effective date of filing (optional):

Signature of organizer(s). (An organizer is a member, or is acting in behalf of a member or members).

Signature

*BTC*

Typed Name:

Bart Cochran

Signature

Typed Name:

Secretary of State use only

W82830

IDAHO SECRETARY OF STATE  
04/02/2009 05:00  
CK: 4993 CT: 227323 SN: 1164212  
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