



**ARTICLES OF ORGANIZATION  
PROFESSIONAL LIMITED  
LIABILITY COMPANY**

(Instructions on back of application)

08 MAR -5 AM 8:57  
SECRETARY OF STATE  
STATE OF IDAHO

1. The name of the professional limited liability company is:  
Healthweave P.L.L.C.
2. The professional LLC is organized for the practice in the profession of: Medicine
3. The address of the initial registered office is: 17302 W. Deer Ridge Road, Post Falls, Idaho 83854  
and the name of the initial registered agent is: Dr. Leanne Rousseau
4. Management of the professional limited liability company will be vested in:
 

Manager(s)  Member(s)
5. If management is to be vested in one or more manager(s), list the name(s) and address(es) of at least one manager. If management is to be vested in members, list the name(s) and address(es) of at least one initial member.

Name

Address

Dr. Leanne Rousseau

17302 W. Deer Ridge Road

Post Falls, Idaho 83854

6. Signature(s) of at least one person responsible for forming the limited liability company:

Signature Leanne Rousseau

Typed Name Dr. Leanne Rousseau

Capacity Member

Signature \_\_\_\_\_

Typed Name \_\_\_\_\_

Capacity \_\_\_\_\_

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