

ARTICLES OF ORGANIZATIONFILED EFFECTIVE **PROFESSIONAL LIMITED** LIABILITY COMPANY

2006 DEC -4 AM 9: 29

(Instructions on back of application)

SECRETARY OF STATE

	The name of the professional limited liability co Heather Oja	mpany is: a, PLLC	STATE OF IDAHO
2.	The professional LLC is organized for the prac	tice in the profes	sion of: Occupational Therapy
3.	The address of the initial registered office is:	34 Eagle Rid	ge Road; Victor, ID 83455
	and the name of the initial registered agent is:	Heather Oja	
4.	Management of the professional limited liability	company will be	e vested in:
	☑ Manager(s) ☐ Mem	ber(s)	
5.	If management is to be vested in one or more address(es) of at least one manager. If mana name(s) and address(es) of at least one initial	gement is to be	the name(s) and vested in members, list the
:	Name	Ac	idress
	ু বিশ্ববিদ্যালয় (প্রতিষ্ঠান বিশ্ববিদ্যালয় স্থান বিশ্ববিদ্যালয় স্থান বিশ্ববিদ্যালয় স্থান বিশ্ববিদ্যালয় সং		
	Heather Oja	34 Eagle Ridge Road; Victor, ID 83455	
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			and the state of t
6.	Signature(s) of at least one person responsible	for forming the li	mited liability company:
6.	Alpakha Dia	for forming the li	mited liability company:
6.	Signature Heather Ga	for forming the li	mited liability company:
6.	SignatureHother Oja	for forming the li	mited liability company:
6.	SignatureHeather Oja Capacity Manager	aton plit: p65	IBAHI CECATANA
6.	SignatureHother Oja	for forming the li	IDAHO SECRETARY OF STATE CK: 591 CT: 207030 Ht: 1917148

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