

**Electronic Articles of Organization  
For  
Florida Limited Liability Company**

L21000034511  
FILED 8:00 AM  
January 15, 2021  
Sec. Of State  
aiparishani

**Article I**

The name of the Limited Liability Company is:

THE RUSTIC LOVER'S MUSE LLC

**Article II**

The street address of the principal office of the Limited Liability Company is:

652 SEDGEWICK WAY  
PALM HARBOR, FL. US 34683

The mailing address of the Limited Liability Company is:

652 SEDGEWICK WAY  
PALM HARBOR, FL. US 34683

**Article III**

The name and Florida street address of the registered agent is:

AMANY SHAMSIDEEN  
652 SEDGEWICK WAY  
PALM HARBOR, FL. 34683

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

Registered Agent Signature: AMANY SHAMSIDEEN

### **Article IV**

The name and address of person(s) authorized to manage LLC:

Title: CEO  
AMANY SHAMSIDEEN  
652 SEDGEWICK WAY  
PALM HARBOR, FL. 34683

Title: AMBR  
HASSAN SHAMSIDEEN  
652 SEDGWICK WAY  
PALM HARBOR, FL. 34683

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### **Article V**

The effective date for this Limited Liability Company shall be:

01/15/2021

Signature of member or an authorized representative

Electronic Signature: AMANY SHAMSIDEEN

I am the member or authorized representative submitting these Articles of Organization and affirm that the facts stated herein are true. I am aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S. I understand the requirement to file an annual report between January 1st and May 1st in the calendar year following formation of the LLC and every year thereafter to maintain "active" status.