

L-1-6000122399

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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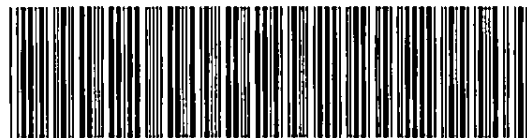
(Business Entity Name)

(Document Number)

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18 FEB 13 PM 2:46  
JAN 18 11 11 PM '18

J. LEGGETT  
FEB 14 2018

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Polished TC LLC  
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Tamera Bayless  
Name of Person

Polished TC LLC  
Firm/Company

12108 N 56<sup>th</sup> St. Suite B  
Address

Temple Terrace, FL ~~08000~~ 33617  
City/State and Zip Code

tamirene@hotmail.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Tamera Bayless at (330) 338-4202  
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- ☒ \$25.00 Filing Fee  
☐ \$30.00 Filing Fee & Certificate of Status  
☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)  
☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

**MAILING ADDRESS:**  
Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**STREET/COURIER ADDRESS:**  
Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

**ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF**

Polished TC LLC

(Name of the Limited Liability Company as it now appears on our records.)  
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on 6/27/14 and assigned Florida document number L16000122399

This amendment is submitted to amend the following:

**A. If amending name, enter the new name of the limited liability company here:**

Polished by TC LLC

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

**Enter new principal offices address, if applicable:**

**(Principal office address MUST BE A STREET ADDRESS)**

12108 N 51st St. Suite B  
Tempe Terrace, FL 33617

**Enter new mailing address, if applicable:**

**(Mailing address MAY BE A POST OFFICE BOX)**

**B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:**

Name of New Registered Agent:

New Registered Office Address:

Enter Florida street address

Florida

City

Zip Code

**New Registered Agent's Signature, if changing Registered Agent:**

*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 relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.*

**If Changing Registered Agent, Signature of New Registered Agent**

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
<del>CEO</del> <del>CEO</del> (C)=Chairman / CED	Tamera Bayless	12108 N 50th St. Suite B. Tempe Terrace, FI 33417	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
<del>CEO</del> <del>CEO</del> (P)=President	Jaunco Gorden		<input type="checkbox"/> Change <input checked="" type="checkbox"/> Add
<del>CEO</del> <del>CEO</del>	Tanya Mitchell		<input type="checkbox"/> Remove <input checked="" type="checkbox"/> Add
<del>CEO</del> <del>CEO</del> (V) Vice President	The Anzira Jones Foundation Incorporated	LD W E S	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Add
<del>CEO</del> <del>CEO</del> (CEU)	Edmire Minter		<input type="checkbox"/> Remove <input checked="" type="checkbox"/> Add
<del>CEO</del> <del>CEO</del> AMBR	Honesty Board		<input type="checkbox"/> Change <input checked="" type="checkbox"/> Add
AMBR	Makayla Williams		<input type="checkbox"/> Remove
AMBR	KINES YOUNG		<input type="checkbox"/> Change

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

Lined area for amending information.

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18 FEB 13 PM 2 46  
STATE OF FLORIDA  
TALLAHASSEE

E. Effective date, if other than the date of filing: Jan 30, 2018 (optional)

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of:  
(b) The 90th day after the record is filed.

Dated Jan 29, 2018.

[Signature]  
Signature of a member or authorized representative of a member

Tameka Bayless  
Typed or printed name of signer