

L99000004367

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

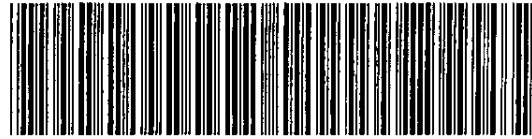
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



100204034981

04/28/11--01019-005 **25.00

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
11 MAY 18 PM 12:05

N. O'Neil MAY 18 2011

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Relda 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:

Anthony Singleton

Name of Person

Relda LLC dba Dermatec

Firm/Company

4430 East Adamo Drive

Address

Tampa FL. 33605

City/State and Zip Code

TSingleton@Dermatec.net

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Craig Greenberg

Name of Person

at (**201**)

793-7992

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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

April 29, 2011

ANTHONY SINGLETON
4430 EAST ADAMO DRIVE
TAMPA, FL 33605

SUBJECT: RELDA, LLC
Ref. Number: L99000004367

We have received your document for RELDA, LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

NO DOCUMENT WAS ENCLOSED.JUST THE COVER LETTER WAS RECEIVED.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6067.

Neysa Culligan
Regulatory Specialist II

Letter Number: 211A00010499

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
11 MAY 18 PM 12:05

Rolda 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 7/15/99 and assigned
Florida document number L99000004367

This amendment is submitted to amend the following:

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

N/A

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

Enter new principal offices address, if applicable:

N/A

(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable:

N/A

(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 608, 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 the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:


MGR = Manager
MGRM = Managing Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGRM	Maxxim Medical	10300 49th St North Clearwater FL 33762	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
MGRM	TSCG Holdings LLC	4430 East Adamo Drive Tampa FL 33605	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove

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

- Remove Maxxim Medical as a Preferred Member
- Remove Becker-Parkin Dental as a Non Preferred Member
- Remove Anthony Singleton as a Non Preferred Member
- Add Anthony Singleton as a 70% Pref Mem 8706 Tantallon Cir Tampa FL 33605
- Add Craig Greenberg as a 30% Pref Mem 134 Kirshon Ave SI NY 10314

Dated 4/20/2011



Signature of a member or authorized representative of a member

Anthony Singleton

Typed or printed name of signer

FILED
11 MAY 18 PM 12:05
SECRETARY OF STATE
DIVISION OF CORPORATION