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COVER LETTER

TO: Amendment Section Division of Corporations		
SUBJECT: Adams Respiratory Products, Inc.		
(Name of Corporation)		
DOCUMENT NUMBER: F05000005730		
The enclosed withdrawal application and fee are submitted for filing.		
Please return all correspondence concerning this matter to the following:		
Carol Spawn Desmond, Esq		
(Name of Person)		
Satterlee Stephens Burke & Burke LLP		
(Firm/Company)		
230 Park Avenue, #1130		
(Address)		
New York, NY 10169		
(City/State and Zip code)		
For further information concerning this matter, please call:		
Carol Spawn Desmond, Esq. at (212) 404-8	3715	
(Name of Person) (Area Code & Da	nytime Telephone Number)	

MAILING ADDRESS:

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

STREET ADDRESS:

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

APPLICATION BY FOREIGN CORPORATION FOR WITHDRAWAL OF AUTHORITY TO TRANSACT BUSINESS OR CONDUCT AFFAIRS IN FLORIDA

Adams Respiratory Products, Inc.	
(Name of Corporatio	m)
F05000005730	The state of the s
(Document Number of Corporati	on (if known)
Delaware	``
(Incorporated Under Law	ws of)
This corporation is no longer transacting business or conducting voluntarily surrenders its authority to transact business or conducting to the conducting to transact business or conducting to the conductin	
This corporation revokes the authority of its registered agent appoints the Department of State as its agent for service of proceedime it was authorized to transact business or conduct affairs in I	ess based on a cause of action arising during the
The following is a current mailing address for the corporation:	
c/o Reckitt Benckiser Inc., 399 Interpac	
(Matting Address)	
Parsippany, NJ 07054 (City/ State /Zip)	
TTI C. d. Daniel Color in the A	C. 4
The corporation agrees to notify the Department of State in the f	nuture of any change in its maining address.
(Signature of a director, president or other officer - if in the hands of a receiver or other court appointed fiduciary, by that fiduciary)	10 JULY Zood
William R. Mordan (Typed or printed name of person signing)	V.P. and Secretary (Title of person signing)
(1 ypea or printed name of person signing)	(11tie of person signing)

FILING FEE \$35