F9400004537

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·TRANSMITTAL LETTER

TO: Amendment Section Division of Corporations
SUBJECT: Muro Pharmaceutical, Inc.
(Name of corporation)
DOCUMENT NUMBER: F94000004537
The enclosed withdrawal application and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Louise A. Luongo, Paralegal
(Name of Person)
Wilmer Cutler Pickering Hale and Dorr LLP
(Firm/Company)
60 State Street
(Address)
Boston, MA 02109
(City/State and Zip code)
For further information concerning this matter, please call:
Louise Luongo at (617) 526-5124
(Name of Person) (Area Code & Daytime Telephone Number)

STREET ADDRESS:

Amendment Section Division of Corporations 409 E. Gaines St. Tallahassee, FL. 32399

MAILING ADDRESS:

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

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

Muro Pharmaceutical. In	ne.
Muro Pharmaceutical, I. (Name of Corporation)	
F94000004537	
(Document Number of Corporation (if	known)
Massachusetts	
(Incorporated Under Laws of)	
This corporation is no longer transacting business or conducting affit voluntarily surrenders its authority to transact business or conduct aff	uirs within the State of Florida and hereby airs in Florida.
This corporation revokes the authority of its registered agent in Fl appoints the Department of State as its agent for service of process be time it was authorized to transact business or conduct affairs in Florid	sed on a cause of action arising during the
The following is a current mailing address for the corporation:	
890 East Street (Mailing Address)	
. (valing reduces)	
Tewksbury, MA 01876	
(City/ State /Zip)	
The componation agrees to notify the Department of State in the future	
	8/23/05
(Signature of a director, president or other officer - if in the hands of a receiver or other court appointed fiduciary, by that fiduciary)	(Date)
Peter A Pelleller (Typed or printed name of person signing)	Chairman (Title of person signing)
FILING FEE \$35	
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