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November 4, 2004

VIA FIRST CLASS MAIL

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

Re: Application to Withdraw Authority - Ryan Pharmaceuticals, LLC

Dear Sir or Madam:

I am counsel to Ryan Pharmaceuticals, LLC ("Ryan"). Enclosed please find an Application By Foreign Limited Liability Company for Withdrawal of Authority to Transact Business in Florida on behalf of Ryan.

I have also enclosed a check, made payable to "Florida Department of State" for \$30, representing the Filing Fee and fee for a Certificate of Status. Please forward same to me at the address above.

If you have any questions, please don't hesitate to contact me.

Thank you in aftvance for your cooperation.

Enc.

Cc: Mr. Brian Smith

truly yours

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR WITHDRAWAL OF AUTHORITY TO TRANSACT BUSINESS IN FLORIDA

K YAN PHARMACEUTICALS LLC		
(Name of limited liability company)		
DELANDRE		
(Jurisdiction of its organization)		
This limited liability company is no longer transacting business in Florida and surauthority to transact business in this state.	rrenders its	
This limited liability company revokes the authority of its registered agent to accept se behalf and appoints the Department of State as its agent for service of process based of action arising during the time it was authorized to transact business in Florida.	rvice on its on a cause	
271 LORONA AUDINE	_	
(Mailing address)		
PELHAM, NY 10803 (City/State/Zip)	_	
(City/State/Zip)	·	
The limited liability company agrees to notify the Department of State in the future of in its mailing address. (Signature of member or authorized representative of a member)	-	
(Typed or printed name of signee)	04 NOV -9 PH 4: 30	

Filing Fee: \$25.00