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## **COVER LETTER**

TO: Registration Division of	Section Corporations		
Corar	nRx LLC		
30 <b>0</b> 0EC1.	(Name of For	eign Limited Liability	Company)
Dear Sir or Madam:			
The enclosed withdra	wal and fee(s) are submitted	d for filing.	
Please return all corre	espondence concerning this	matter to the following	3:
Erik J. Heikken	en		
	(Name of Person)		_
CoramRx LLC			
	(Firm/Company)		-
555 17th Street	, Suite 1500		
	(Address)		-
Denver, CO 80	202		
	(City/State and Zip Cod	e)	<del>-</del>
For further information	on concerning this matter, p	lease call:	
Erik J. Heikken	en	303 at (	672-8631
(Na	ime of Person)		Daytime Telephone Number)
Registration Division of Clifton Buil 2661 Execu	Corporations	Regis Divis P.O. I	LING ADDRESS: stration Section ion of Corporations Box 6327 hassee, Florida 32314
Enclosed is a check	for the following amount:		
□ \$25 Filing Fee	☑ \$30 Filing Fee & Certificate of Status	□ \$55 Filing Fee & Certified Copy	□ \$60 Filing Fee, Certificate of Status & Certified Copy

## NOTICE OF WITHDRAWAL OF CERTIFICATE OF AUTHORITY

CoramRx LLC
(Name of limited liability company)
Delaware
(Jurisdiction of its organization)
14-OCT-2005
(Date registered with Florida Department of State)
M05000005790
(Florida Document Number)
This limited liability company is withdrawing its certificate of authority in this state.
(Signature of authorized representative)  Michael E. Dell, Secretary
(Typed or printed name of signee)

Filing Fee: \$25.00