COMPANY LETTERHEAD

Date

Rodrick J. Marriott, Director

Department of Consumer Protection

Drug Control Division

State Office Building, Room 145

165 Capitol Avenue

Hartford, CT 06106

Dear Director Marriott:

Enclosed please find a certificate signed by\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ and notarized by

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_. Also enclosed is a corresponding Free Sale Certificate.

Please have the enclosed Free Sale Certificate signed by the Director of the Department of Consumer Protection Drug Control Division, notarized and authenticated by the Secretary of State of Connecticut. Enclosed is a check # \_\_\_\_\_\_\_\_\_\_\_\_ in the amount of **$40.00** to cover authentication fees for the certificate.

Upon authentication, please forward to our office in the enclosed self-addressed envelope.