Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H100001887973)))



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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023

: (850)222-1092

Fax Number

: (850)878-5368

**Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. **

Email Address:

LLC AMND/RESTATE/CORRECT OR M/MG RESIGNT. CLINE

CVS 75674 FL, L.L.C.

Certificate of Status Certified Copy Page Count 05 \$30.00 Estimated Charge

AUG 24 2010

EXAMINER

COVER LETTER

TO:	Registration Division of C				
SUBJ	ECT:	cvs	75674 FL, L.L.C.		
		Name of Foreign	Limited Liability Com	рапу	
Dear :	Sir or Madam:				•
The en	nclosed applica	tion, certificate and fee(s) a	ere submitted for filing.		
Please	return all corr	espondence concerning this	matter to the following	;	
,		Melanie K. Luker			72H 7AL
		Name of Person	·		COR.
					HE G
	C.	VS/Caremark Corporation			SS: (2)
		Firm/Company			
		• •			FEC
	One C\	/S Drive, Attention: Legal Dept	t .		
		Address			A Du
		Woonsocket RI 02895			
	······································	City/State and Zip Code	 _		
	•				
		mkluker@cvs.com			
E-n	nail address: (to	be used for future annual	report notification)		
For fi	irther informati	on concerning this matter, ;	olease call:		
		nie K. Luker	at ()	770-3565	
	Nam	e of Person	Area Code & Daytir	ne Telephone Number	
	STREET/C	OURIER ADDRESS:	МАП	ING ADDRESS:	
Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle		Registration Section			
			Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314		
		Florida 32301			
		for the following amount:	•		
□\$2 :	5 Filing Fee	\$30 Filing Fee &	\$55 Filing Fee &	\$60 Filing Fee,	0-
		Certificate of Status	Certified Copy	Certificate of Status Certified Copy	æ

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY TO FILE AMENDMENT TO APPLICATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

SECTION I (1-3 must be completed)

 Name of limited liability company as it appears on the records of the Florida Department of State: CVS 75674 FL, L.C. 	
2. Jurisdiction of its organization: Delaware	
· · · · · · · · · · · · · · · · · · ·	· 0
3. Date authorized to do business in Florida: March 19, 2008	in Se
SECTION II (4-7 complete only the applicable changes)	F TA
4. If the amendment changes the name of the limited liability company, when was the change effected under the laws of its jurisdiction of organization? August 19, 2010	CY OF
5. New name of the limited liability company: SCP 2010-C35-505 LLC	
5. New name of the limited liability company: SCP 2010-C35-505 LLC (must end with "Limited Liability Company," "L.L.C.," or "LLC.")	
(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the written consent of the managers or managing members adopting the alternate name. The alternate name must end with "Limited Liability Company," "L.L.C." or "LLC.") 6. If the amendment changes the period of duration, indicate new period of duration: N/A 7. If the amendment changes the jurisdiction of organization, indicate new jurisdiction:	
N/A	
8. If the amendment corrects any false statement, indicate the statement being corrected and the correction: N/A	
9. Attached is an original certificate, no more than 90 days old, evidencing the aforementioned amendment(s), duly authenticated by the official having, custody of records in the jurisdict under the law of which this entity is organized. Signature of a member or the authorized representative of a member	tion
Melanie K. Luker, Authorized Person	
Typed or printed name of signes	

Filing Fee: \$25.00

Delaware

PAGE

The First State

1, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY THE ATTACHED IS A TRUE AND CORRECT COPY OF THE CERTIFICATE OF AMENDMENT OF "CVS 75674 FL, L.L.C.", CHANGING ITS NAME FROM "CVS 75674 FL, L.L.C." TO "SCP 2010-C35-505 LLC", FILED IN THIS OFFICE ON THE NINETEENTH DAY OF AUGUST, A.D. 2010, AT 6:23 O'CLOCK P.M.

2010 AUG 23 AM & 19

4517152 R100

100844165

UTHENTICATION: 81845

DATE: 08-20-10

You may verify this cortificate online

Secretary of State
Division of Corporations
Delivered 05:51 FM 08/19/2010
FILED 05:23 PM 08/19/2010
SRV 100844165 - 4517132 File
DRMATION

State of Delaware

AMENDED AND RESTATED CERTIFICATE OF FORMATION OF CVS 75674 FL, L.L.C.

THIS AMENDED AND RESTATED CERTIFICATE OF FORMATION of CVS 75674 FL, L.L.C. (the "Company"), dated as of August 10, 2010, has been duly executed and is being filed by the undersigned, as an authorized person, in accordance with the provisions of 6 Del. C. §18-208, to amend and restate the original Certificate of Formation of the Company, which was filed on March 11, 2008, with the Secretary of State of the State of Delaware (as heretofore amended, the "Certificate"), to form a limited liability company under the Delaware Limited Liability Company Act (6 Del. C. §18-101, et seg.).

The Certificate is hereby amended and restated in its entirety to read as follows:

- 1. Name. The name of the limited liability company is SCP 2010-C35-505 LLC.
- Registered Office. The address of the registered office of the Company in the State of Delaware is c/o The Corporation Trust Company, Corporation Trust Center, 1209 Orange Street, Wilmington, New Castle County, Delaware 19801.
- 3. Registered Agent. The name and address of the registered agent for service of process on the Company in the State of Delaware is The Corporation Trust Company, Corporation Trust Center, 1209 Orange Street, Wilmington, New Castle County, Delaware 19801.

IN WITNESS WHEREOF, the undersigned has executed this Amended and Restated Certificate of Formation as of the date first-above written.

Name: Melanie K. Luker Title: Authorized Person