

2024 FLORIDA LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

DOCUMENT# L12000052478

Entity Name: CVS - TALLAHASSEE, LLC

Current Principal Place of Business:

1615 MAHAN CENTER BLVD
TALLAHASSEE, FL 32308

Current Mailing Address:

1615 MAHAN CENTER BLVD
TALLAHASSEE, FL 32308 US

FEI Number: 45-5026255

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

THOMAS HOWELL FERGUSON, P.A.
2615 CENTENNIAL BLVD
STE 200
TALLAHASSEE, FL 32308 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: MICHAEL KALIFEH, CPA

08/13/2024

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title MGR & P
Name DRYGAS, KEVIN A
Address 1615 MAHAN CENTER BLVD
City-State-Zip: TALLAHASSEE FL 32308

Title VP
Name DRYGAS, AMBER
Address 1615 MAHAN CENTER BLVD
City-State-Zip: TALLAHASSEE FL 32308

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: KEVIN A. DRYGAS

MANAGER

08/13/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date