2020 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 26, 2020
Secretary of State
8492351139CC

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Entity Name: MINUTECLINIC DIAGNOSTIC OF FLORIDA, LLC

Current Principal Place of Business:

1 CVS DRIVE
WOONSOCKET, RI 02895

Current Mailing Address:

1 CVS DRIVE
WOONSOCKET, RI 02895 US

FEI Number: 20-3516155

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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:

Electronic Signature of Registered Agent — Date

Authorized Person(s) Detail :

Title	MGRM	Title	PRESIDENT
Name	MINUTECLINIC, L.L.C.	Name	VITTI, SHARON L
Address	1 CVS DRIVE	Address	1 CVS DRIVE
City-State-Zip:	WOONSOCKET RI 02895	City-State-Zip:	WOONSOCKET RI 02895
Title	VP, SECRETARY	Title	ASSISTANT SECRETARY
Name	MOFFATT, THOMAS S	Name	LUKER, MELANIE K
Address	1 CVS DRIVE	Address	1 CVS DRIVE
City-State-Zip:	WOONSOCKET RI 02895	City-State-Zip:	WOONSOCKET RI 02895

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: MELANIE K LUKER ASSISTANT SECRETARY 04/26/2020

Electronic Signature of Signing Authorized Person(s) Detail — Date