## **2025 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M05000006032

Entity Name: MINUTECLINIC DIAGNOSTIC OF FLORIDA, LLC

Current Principal Place of Business:

ONE CVS DRIVE

WOONSOCKET, RI 02895

**Current Mailing Address:** 

ONE 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

FILED Mar 12, 2025

**Secretary of State** 

5643028373CC

## Authorized Person(s) Detail:

Title MANAGER

Name MINUTECLINIC, L.L.C.
Address ONE CVS DRIVE

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. ST ANGELO

ASSISTANT SECRETARY

03/12/2025