

2023 FOREIGN PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# F02000003266

Entity Name: MEDCO HEALTH SOLUTIONS, INC.

Current Principal Place of Business:

ONE EXPRESS WAY
SAINT LOUIS, MO 63121

Current Mailing Address:

ONE EXPRESS WAY
SAINT LOUIS, MO 63121 US

FEI Number: NOT APPLICABLE

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CT 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

Officer/Director Detail :

Title DIRECTOR, VP
Name PHILLIPS, BRADLEY
Address ONE EXPRESS WAY
City-State-Zip: SAINT LOUIS MO 63121

Title VICE PRESIDENT
Name BARNETT, PETER
Address ONE EXPRESS WAY
City-State-Zip: SAINT LOUIS MO 63121

Title ASSISTANT VICE PRESIDENT
Name BOWE, CHRISTOPHER
Address ONE EXPRESS WAY
City-State-Zip: SAINT LOUIS MO 63121

Title SECRETARY
Name BROWN, GENEVA
Address ONE EXPRESS WAY
City-State-Zip: SAINT LOUIS MO 63121

Title ASSISTANT TREASURER
Name FLEMING, MARK
Address ONE EXPRESS WAY
City-State-Zip: SAINT LOUIS MO 63121

Title ASSISTANT VICE PRESIDENT
Name GRAY, RICHARD
Address ONE EXPRESS WAY
City-State-Zip: SAINT LOUIS MO 63121

Title ASSISTANT VICE PRESIDENT
Name HALEY, WILLIAM
Address ONE EXPRESS WAY
City-State-Zip: SAINT LOUIS MO 63121

Title ASSISTANT TREASURER
Name HART, JOANNE
Address ONE EXPRESS WAY
City-State-Zip: SAINT LOUIS MO 63121

Continues on page 2

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 an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: SCOTT LAMBERT

TREASURER

04/10/2023

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title TREASURER, VP
Name LAMBERT, SCOTT
Address ONE EXPRESS WAY
City-State-Zip: SAINT LOUIS MO 63121

Title VICE PRESIDENT
Name MIMLITZ, JOHN
Address ONE EXPRESS WAY
City-State-Zip: SAINT LOUIS MO 63121

Title ASSISTANT SECRETARY
Name QUENTAL, ANN
Address ONE EXPRESS WAY
City-State-Zip: SAINT LOUIS MO 63121

Title ASSISTANT SECRETARY
Name SCHMEHL, SANDRA J.
Address ONE EXPRESS WAY
City-State-Zip: SAINT LOUIS MO 63121

Title ASSISTANT VICE PRESIDENT
Name SECCHIA, RICHARD
Address ONE EXPRESS WAY
City-State-Zip: SAINT LOUIS MO 63121

Title ASSISTANT SECRETARY
Name LEONE, STEFANIE
Address ONE EXPRESS WAY
City-State-Zip: SAINT LOUIS MO 63121

Title ASSISTANT SECRETARY
Name PEREZ, LYNN
Address ONE EXPRESS WAY
City-State-Zip: SAINT LOUIS MO 63121

Title ASSISTANT TREASURER
Name REYNOLDS, DREW
Address ONE EXPRESS WAY
City-State-Zip: SAINT LOUIS MO 63121

Title ASSISTANT VICE PRESIDENT
Name SPILLANE, DANIEL
Address ONE EXPRESS WAY
City-State-Zip: SAINT LOUIS MO 63121

Title PRESIDENT
Name KAUTZNER, ADAM
Address ONE EXPRESS WAY
City-State-Zip: SAINT LOUIS MO 63121