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JIVISION OF CORPORATION

FOREIGN PROFIT QUALIFICATION

Nashua Hollis CVS, Inc.

Certificate of Status	0
Certified Copy	0
Page Count	05
Estimated Charge	\$70.00

HACKARIN PROQUENCE

Child Child

Public Anseas Helpi

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

Nashua Hollis	CVS. Inc.		P 以 保 。
(Enter name of	corporation; must include "INCORPORAT Corp," "Inc," "Co," or "Corp.")	ED,	ACCOMPANY," "CORPORATION," "COMPANY," "CORPORATION," adopted for the purpose of transacting business in Floridal 05-0394661
(If name unavai	lable in Florida, enter alternate corporate ra	nuc	adopted for the purpose of transacting business in Florida
New Hampshi	ге	3.	05-0394661
(State or country	under the law of which it is incorporated)		(FEI number, if applicable)
12/11/1981		5.	perpetual
(Dat	of incorporation)		(Duration: Year corp. will cause to exist or "perpetual")
_ п/а			
			n Floride, if prior to registration) 502, F.S., to determine penalty liability)
One CVS Dave	, Woonsocket RI 02895		oza, i iza de deletimo panially travalley,
	L PICCHACORELIN CASSS		
		addı	ress)
·	(Principal office		•
	(Principal office , Legal Department, Woonsocket RI 02	895	5
\	(Principal office	895	5
One CVS Drive	(Principal office , Legal Department, Woonsocket RI 02	895	5
One CVS Drive	(Principal office , Legal Department, Woonsocket RI 02 (Current mailing	1895 add	ress)
One CVS Drive	(Principal office e, Legal Department, Woonsocket RI 02 (Current mailing of a retail pharmacy	895 add	ress) suntry to be carried out in state of Florida)
One CVS Drive	(Principal office) Legal Department, Woonsocket RI 02 (Current mailing) of a retail pharmacy a) of corporation authorized in home state of	895 add	ress) suntry to be carried out in state of Florida)
One CVS Drive management ((Purpose) Name and stre Name:	(Principal office t, Legal Department, Woonsocket RI 02 (Current mailing of a retail pharmacy a) of corporation authorized in home state of et address of Florida registered agent: (895 add	ress) suntry to be carried out in state of Florida)
one CVS Drive management ((Purpose) Name and stre Name:	(Principal office t, Legal Department, Woonsocket RI 02 (Current mailing of a retail pharmacy a) of corporation authorized in home state of t address of Florida registered agent: (CT Corporation System	895 add	ress) Support to be carried out in state of Florida) Sox NOT acceptable)
One CVS Drive management ((Purpose) Name and stre Name:	(Principal office t, Legal Department, Woonsocket RI 02 (Current mailing of a retail pharmacy a) of corporation authorized in home state of at address of Florida registered agent: (CT Corporation System 1200 South Pine Island Road	895 add	ress) suntry to be carried out in state of Florida)
One CVS Drive management of (Purpose) Name and stree Name: Office Address: O. Registered a faving been namesignated in this orther agree to a faving present of the control of the co	(Principal office t, Legal Department, Woonsocket Ri 02 (Current mailing of a retail phormacy a) of corporation authorized in home state of et address of Florida registered agent: (CT Corporation System 1200 South Pine Island Road Plantation (City) gent's acceptance: led as registered agent and to accept se application, I hereby accept the appoi	P.O	ress) unary to be carried out in state of Florida) Box NOT acceptable) , Florida see attached (Zip code) te of process for the above stated corporation at the place tent as registered agent and agree to act in this capacity. It that we to the proper and complete performance of my dutie

- 11. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.
- 12. Names and business addresses of officers and/or directors:

A. DIRECTORS	
Chairman: see attached	
Address:	
Vice Chairman:	25.0
Address:	THE STATE OF THE S
	627
Director:	(DA 5)
Address:	
Olesator	
Director:	
Address:	
B. OFFICERS	
President: see attached	
Address:	
Vice President:	
Address:	
Secretary:	
Address;	
Treasurer:	
Address:	
and a	
NOTE: If necessary, you may attach an addendum to the application listing additional officers at	nd/or directors.
(Signature of Director or Officer listed in number 12 of the application)	
Distribution (Control of the Application)	

(Typed or printed name and capacity of person signing application)

14. Melanie K. Luker, Assistant Secretary

NASHUA HOLLIS CV5, INC. DIRECTORS AND CORFORATE OFFICERS Business Address: One CVS Drive, Woonsocket RI 02895

DIRECTOR/PRESIDENT

Christopher W. Bodine One CVS Drive, Woonsocket, RI 02895

DIRECTOR/VICE PRESIDENT

Zenon P. Lankowsky
One CVS Drive, Woonsocket, RI 02895

DIRECTOR/VICE PRESIDENT

Christine L. Egan One CVS Drive, Woonsocket, RI 02895

VICE PRESIDENT

Nancy R. Christal 670 White Plains Road, Scarsdale, NY 10583

TREASURER

Larry D. Solberg One CVS Drive, Woonsocket, RI 02895

SECRETARY

Thomas S. Moffatt One CVS Drive, Woonsocket, RI 02895

ASSISTANT SECRETARY

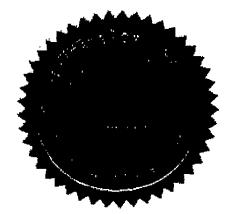
Melanie K. Luker One CVS Drive, Woonsocket, RI 02895



State of New Hampshire Bepartment of State

CERTIFICATE OF EXISTENCE

I, William M. Gardner, Secretary of State of the State of New Hampshire, do hereby certify NASHUA HOLLIS CVS, INC. (formerly CVS OF PORTSMOUTH, INC.) is a New Hampshire corporation duly incorporated under the laws of the State of New Hampshire on December 11, 1981. I further certify that all fees and annual reports required by the Secretary of State's office have been received and that articles of dissolution have not been filed.



TESTIMONY WHEREOF, I hereto set my hand and cause to be affixed the Seal of the State of New Hampshire, this 15th day of December, A.D. 2004

William M. Gardner Secretary of State