(Requestor's Name)				
(Address)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				

Office Use Only



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CSC - WILMINGTON
Suite 400
2711 Centerville Road
Wilmington De 19808
800-927-9800
302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Vera M. Norris

Date: October 3, 2013

Order#: 828414-035

Re: MCKESSON CORPORATION

Enclosed please find:

XX Change of Registered Agent and Office.

X Check in the amount of \$35.00.

Please take the following action:

XX File in your office on a routine basis.

Issue Proof of Filing.

XX Please return evidence to the following:

Attn: Vera M. Norris

c/o Corporation Service Company
2711 Centerville Road, Suite 400

Wilmington, DE 19808

XX Return envelope is also enclosed for your convenience.

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

OUCA.XCOA

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

statement of cha	unge is submitted for a corporation orga	02, 607.1508, or 617.1508, Florida Statutes, thi: mized under the laws of the State of <mark>Delaware</mark> tered agent, or both, in the State of Florida.	<i>S</i>	
1. The name of	the corporation: MCKESSON CORPOR	ATION		
2. The principal	office address: One Post Street, San Fr	rancisco, CA 94104		
3. The mailing a	address (if different):			
4. Date of incor	poration/qualification: 8/24/1994	Document number: <u>F94000004410</u>		
	i street address of the current registered timent of State: (If resigned, enter resign			3 V.c
	The Prentice-Hall Corporation System, Inc.			ISIO ISIO
	1201 Hays Street		13 OCT -7	H OF CO
	Tallahassee, FL 32301			CASS CASS
6. The name and (if changed):	l street address of the new registered age	ent (if changed) and /or registered office	AM 10: 45	S MATE
	Corporation Service Company			
	1201 Hays Street			
	P.O. Box NO	T acceptable		
	Tallahassee, FL 32301			
The street address changed will	ess of its registered office and the street be identical.	t address of the business office of its registered	agen	ıt,
Such change was authorized by the	as authorized by resolution duly adopte ne board, or the corporation has been no	d by its board of directors or by an officer so otified in writing of the change.		
(2	Dona Priebe, Vice President		
Signati	re of an officer or director	Printed or typed name and title		
performance of agent. Or, if the hereby confirm	my dulies, and I am familiar with and	nd agree to act in this capacity. tutes relative to the proper and complete accept the obligation of my position as register lect a change in the registered office address, in writing of this change.	red I	
By: Sym	nature of Registered Agent	9/30/2013		
	nature of Registered Agent	Date		
Sylvia Queppe	t, Asst VP			
	yped or Printed Name			

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

* * * FILING FEE: \$35.00 * * *

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

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3. The mailing	address (if different):				
4. Date of incom	rporation/qualification: 8/24/1994	Document number: F94000004410			
5. The name an		gent and registered office on file with the	·		
	The Prentice-Hall Corporation System, Inc.				
	1201 Hays Street				
	Tallahassee, FL 32301				
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed): Corporation Service Company			AH 10: 45		
	1201 Hays Street				
P.O. Box NOT acceptable					
	Tallahassee, FL 32301				
		address of the business office of its registere			
Such change wanthorized by	vas authorized by resolution duly adopted the board, or the corporation has been no	I by its board of directors or by an officer so tified in writing of the change.			
	22	Dona Priebe, Vice President			
I hereby accep I further agree performance o agent. Or, if thereby confirm	ture of an officer of director If the appointment as registered agent an to comply with the provisions of all stat f my duties, and I am familiar with and a his document is being filed merely to refl that the corporation has been notified i on Service Company	Printed or typed name and title d agree to act in this capacity. utes relative to the proper and complete accept the obligation of my position as regist ect a change in the registered office address n writing of this change.	ered , I		
	gnature of Registered Agent	9/30/2013			
Sı	gnature of Registered Agent	Date			
If signing on b	ehalf of an entity:				
Sylvia Queppe	·				
	Typed or Printed Name * * * FILING FE	'			
	FILINGFE	- COUNTY - CAN			

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314