To: ______ 12/18/24, 4:50 PM



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Division of Corporations Fax Number : (850)617-6380

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Account Name : C T CORPORATION SYSTEM Account Number : FCA000000023 Phone : (614)280-3338 Fax Number : (614)573-3996

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MERGER OR SHARE EXCHANGE

CVS PHARMACY, INC.

| Certificate of Status | 0 |
|-----------------------|----------|
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Articles of Merger For Florida Limited Liability Company

The following Articles of Merger is submitted to merge the following Florida Limited Liabinty/Company(tes) in accordance with s. 605.1025, Florida Statutes.

FIRST: The exact name, form/entity type, and jurisdiction for each merging party are as follows:

| Name | Iurisdiction | Form/Entity Type |
|-------------------------------|--------------|---------------------------|
| Circle Tallahassee RE, L.L.C. | Florida | Limited Liability Company |
| | | |
| | | |
| | | |
| | | |
| , | | -, |

SECOND: The exact name, form/entity type, and jurisdiction of the surviving party are as follows:

| Name | Jurisdiction | Form/Entity Type |
|--------------------|--------------|------------------|
| CVS Pharmacy, Inc. | Rhode Island | Corporation |
| | | |

THIRD: The merger was approved by each domestic merging entity that is a limited liability company in accordance with ss.605.1021-605.1026; by each other merging entity in accordance with the laws of its jurisdiction; and by each member of such limited liability company who as a result of the merger will have interest holder liability under s.605.1023(1)(b).

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2024-12-18 15:58-04 CST

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FOURTH: Please check one of the boxes that apply to surviving entity: (it applicable)

....

... . ..

This entity exists before the merger and is a domestic filing entity, the amendment, if any to its public organic record × are attached.

This entity is created by the merger and is a domestic filing entity, the public organic record is attached.

This entity is created by the merger and is a domestic limited liability limited partnership or a domestic limited liability partnership, its statement of qualification is attached.

This entity is a foreign entity that does not have a certificate of authority to transact business in this state. The mailing address to which the department may send any process served pursuant to s. 605.0117 and Chapter 48, Florida Statutes is:

FIFTH: This entity agrees to pay any members with appraisal rights the amount, to which members are entitled under ss.605.1006 and 605.1061-605.1072, F.S.

..

SIXTH: If other than the date of filing, the delayed effective date of the merger, which cannot be prior to nor more than 90 days after the date this document is filed by the Florida Department of State:

.

. ..

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

SEVENTH: Signature(s) for Each Party:

| Name of Entity/Organization: Circle Tallahassee RE, L.L.C. CVS Pharmacy, Inc. | | Signature(s): Index I. S. Aufer | | Typed or Printed Name of Individual: Melanie K. St Angelo Melanie K. St Angelo | | |
|---|---|--|--|---|-------------|-------------------------------|
| | | Judenski Afri Judenski Asfri | | | | |
| Genera Florida | rations: il partnerships: il Limited Partnerships: | <i>(If no dire</i> Signature Signature | <i>ectors selected, sig</i> of a general partners s of all general par | | | |
| Non-Florida Limited Partnerships: Signatur | | Signature | of a general partn | er | | |
| Limited Liability Companies: Signatur | | of an authorized p | erson | | | |
| <u>Fees:</u> | For each Limited Liability Co For each Limited Partnership: For each Other Business Entit | | \$25.00 \$52.50 \$25.00 | For each Corporation For each General Propertified Copy (or | artnership: | \$35.00 \$25.00 \$30.00 |