CT CORPORATION SYSTEM

CORPORATION(S) NAME		WBOL	15
-(1)-8th-Street-CVS, LLC			
(2) Curry Ford CVS, LLC	· · · · · · · · · · · · · · · · · · ·		
(3) MLK Tampa CVS, LLC			
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() Profit () Nonprofit	() Amendment	() Merger	
O Foreign	() Dissolution/Withdrawal () Reinstatement	() Mark	
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() Call When Ready (x) Walk In () Mail Out	() Call If Problem () Will Wait	() After 4:30 (x) Pick Up	AH II: 46 OF STATE E.F. ORIDA
Name Availability	5/18/01	Order#: 4390606	
Document Examiner Updater Verifier	MD1-11345	Ref#:	200
W.P. Verifier	- 	Amount: \$	

660 East Jefferson Street Tallahassee, FL 32301 Tel. 850 222 1092 Fax 850 222 7615 7



FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

May 18, 2001

CT CORPORATION SYSTEM

SUBJECT: MLK TAMPA CVS, L.L.C. Ref. Number: W01000011365

We have received your document for MLK TAMPA CVS, L.L.C. and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following:

Section 608.407, Florida Statutes, requires the document(s) to be signed by a member or by the authorized representative of a member.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 487-6025.

Trevor Brumbley Document Specialist

Letter Number: 601A00030521

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SECRETARY OF STATE
TALL AHASSEF FLORIDA

#3650

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

MLK Tampa CVS, L.L.C.

The mailing address and street address of the principal office of the Limited Liability Company is:

One CVS Drive, Legal Department, Woonsocket RI 02895

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

The name and the Florida street address of the registered agent are:

C T Corporation System Name c/o CT Corporation System, 1200 South Pine Island Road Florida street address (P.O. Box NOT acceptable) Plantation City, State, and Zip

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S..

CONNE BRYAN Registered wagear's Signature SPECIAL ASSISTANT SECRETARY Article IV - Management (Check box if applicable.) The Limited Liability Company is to be managed by one manager or more managers and is, therefore, a manager - managed company. (An additional article must be added if an effective date is requested) Signature of a member or an authorized representative of a member.

(In accordance with section 608.408(3), Florida Stanutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

Molanie K, Luker, Authorized Representative Typed or printed name of signee

filing fees: \$ 100.00 Filing Fee for Articles of Organization 25.00 Designation of Registered Agent