CT CORPORATION SYSTEM

CORPORATION(S) NAME

_01000016951

(1) Dunedin CVS, LLC			
(2) John Young Pkwy CVS, LLC			
(3) North Miami CVS, LLC			
(4) Bradenton CVS, LLC			
(5) Plantation CVS, LLC			Fa O
(6) Melbourne CVS, LLC			
(7) Suntree CVS, LLC			
(8) Merrill University CVS, LLC	-		
(9) Atlantic Jacksonville CVS, LI	C .		DE 3
(10)Palm Beach Gardens CVS, Ll	LC		= .
() Profit () Nonprofit	() Amendment	() Merger	REC 1 BCT -
() Foreign	() Dissolution/Withdrawal () Reinstatement	() Mark	RECEIVED BCT -3 PMI2: C
()Limited Partnership	() Annual Report () Name Registration () Fictitious Name	() Other () Change of RA () UCC	RECEIVED 01 DCI -3 PMIZ: 07 VISION OF GORPORATION
() Certified Copy	() Photocopies	() CUS	randonia y si na 14 m de esta T <u>a</u> nta.
() Call When Ready (x) Walk In () Mail Out	() Call If Problem () Will Wait	() After 4:30 (x) Pick Up	
Name Availability Document	10/3/01	Order#: 4823679 90000 -10/0	16218492 13/0101054033
Examiner Updater Verifier	Mes and a		125.00 ****125.00
W.P. Verifier		Amount: \$	

660 East Jefferson Street Tallahassee, FL 32301 Tel. 850 222 1092 Fax 850 222 7615 \$301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:		
The name of the Limited I	iability Company is:	
Bradento	on CVS, L.L.C.	-
ARTICLE II - Address: The mailing address and st ONC CVS	reet address of the principal office of the Limited Liz	ability Company is:
WOONSOCKE	T RI 02895	± + +
	d Agent, Registered Office, & Registered Agent's	Signature:
The name and the Florida s	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)	. TAR SELECTION SELECTION OF SE
•	Plantation FL 33324 City, State, and Zip	· · · · · · · · · · · · · · · · · · ·
statutes relating to the propaccept the obligations of my Article IV - Management	to act in this capacity. I further agree to comply with over and complete performance of my duties, and I amy position as registered agent as provided for in Chap CT Comporation System CT Comporation System CT CT Comporation System CT CT Comporation System CC T Compo	the provisions of all familiar with and ster 608, F.S. 250 00 00 00 00 00 00 00 00 00 00 00 00 0
<i>//-</i> }	ional article must be added if an effective date is required to a member or an authorized representative of a m	u
tha A	accordance with section 608.408(3), Florida Statutes, the exect this document constitutes an affirmation under the penalties of a the facts stated herein are true.) Assistant Secretary CVS Meridian Typed or printed name of signee	tion perjury Inc. (MEMBER)

FILING FEES:

\$ 100.00 Filing Fee for Articles of Organization \$ 25.00 Designation of Registered Agent \$ 30.00 Certified Copy (OPTIONAL) \$ 5.00 Certificate of Status (OPTIONAL)