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

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

## **ARTICLE I - Name:**

The name of the Limited Liability Company is:

CVS 2825 Brandon, L.L.C.

## **ARTICLE II - Address:**

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 FL 33324
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.. C T Corporation System

Comice Byone Registered Agent's Signature Article IV - Management (Check box if applicable.) The Limited Liability Company is to be managed by one manager or more managers and therefore, a manager - managed company. be added if an effective date is requested)

Signature of a member or an authorized representative of a member. Brandon CVS, Inc. (Member)

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

Melanie K. Luker, Assistant Secretary Typed or printed name of signee

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)