CT CORPORATION THOR OCCOODISAO

CORPORATION(S) NAME		o IAI
1. CVS 5786 FL, L.L.C.		CORE CAR
2. CVS 5468 FL, L.L.C.		FIL ASSIII
3. CVS 3231 FL, L.L.C.		E D
4. CVS 5177 FL, L.L.C.		9: STA ORI
5. CVS 4015 FL, L.L.C.		D _A -
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() Profit () Nonprofit	() Amendment	() Merger () Mark () Other
() Foreign	() Dissolution/Withdrawal () Reinstatement	() Mark
() Limited Partnership	() Annual Report () Name Registration () Fictitious Name	() Other () Change of RA () UCC
() Certified Copy	() Photocopies	() CUS
() Call When Ready (x) Walk In () Mail Out	() Call If Problem () Will Wait	() After 4:30 (x) Pick Up
Name Availability Document Examiner	5/23/02 N ^{N→} >	Order#: 5350965 300055000232 -05/23/0201059001 Ref#: ****125.00 ****125.00
Updater Verifier W.P. Verifier		Amount: \$

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

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 608.503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

1.	CVS 3231 FL, L.L.C.	
	(Name of foreign limited liability company)	a Mas
	Delaware (Jurisdiction under the law of which foreign limited liability company is organized) 3. (FEI number, if applicable)	
4.	May 15, 2002 (Date of Organization) 5. Perpetual (Duration: Year limited liability company will cease to exist or "perpetual")	<u> </u>
6.		Ö
7.	One CVS Drive, Woonsocket RI 02895	*
	(Street address of principal office)	· *
8.	If limited liability company is a manager-managed company, check here	
9.	The usual business addresses of the managing members or managers are as follows:	
	One CVS Drive, Woonsocket RI 02895	=:
		-
		·
the	 Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of record e jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, a inslation of the certificate under oath of the translator must be submitted.) 	ds in
11	. Nature of business or purposes to be conducted or promoted in Florida: real estate acquisition	
	Signature of a member or an authorized representative of a member. (In accordance with section 608.408(3), F.S., the execution of this document constitutes	· e-
	an affirmation under the penalties of perjury that the facts stated herein are true.) Melanie K. Luker, Authorized Person	e te

Typed or printed name of signee

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415 OR 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

TO DESIGNATE A REGISTERI	ED OFFICE AN	ID REGISTERED A	AGENT IN	THE STATE	OF	
FLORIDA.			-	-		
1. The name of the Limited Liab	bility Company	is:				
CVS 3231 FL, L.L.C.						

? The name	and the Florida street address of t	he registered agent and of	fice are:		
z. The name	and the fields shoot address of	mo 10810101 agoin and or	₹ω.	0	
	C.T. Camanakian Stratom		L CKI	2 MA	
	C T Corporation System				77
	1	(Name)	ANY (ASSEE	23	
	c/o C T Corporation System, 1200 Se	outh Pine Island Road		=	
	Florida street address	(P.O. Box NOT ACCEPTABLE	LORIDA	9: 24	
	Plantation	FL 33324			

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.

City/State/Zip

MASMISC

ASSISTANT SECRETARY

C T Corporation System,

\$ 100.00 Filing Fee for Application

\$ 25.00 Designation of Registered Agent

\$ 30.00 Certified Copy (optional)

\$ 5.00 Certificate of Status (optional)

Delaware

The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "CVS 3231 FL, L.L.C." IS DULY FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE TWENTY-FIRST DAY OF MAY, A.D. 2002.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE NOT BEEN ASSESSED TO DATE.



Farriet Smith Windson Harrlet Smith Windsor, Secretary of State

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AUTHENTICATION: 1788892

DATE: 05-21-02