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

IN COMPLIANCE WITH SECTION 608.508, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA: 1 CVS 5172 FL, L.L.C. (Name of foreign limited liability company) 2. Delaware (Jurisdiction under the law of which foreign limited liability (FEI number, if applicable) company is organized) 11/05 perpetual (Duration: Year limited liability company will cease to exist or "perpetual") (Date first transacted business in Florids. (See sections 608.501, 508.502, and 817.155, F.S.) 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 Woonspeket RJ 02895 10. Attached is an original certificate of existence, no more from 90 days old, duly authenticated by the official having custody of records in the jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, a translation of the certificate under eath of the translator must be submitted.) 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 an affirmation under the penalties of perjury that the facts stated herein are true.) Melsnie K. Luker, Assistant Secretary of CVS Pharmacy, Inc. (member) Typed or printed name of signee

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415 & 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.

I. The name of the	he Limited Liability Company is:	
CVS 5172 FL, L.L.C	<u> </u>	
2. The name and	the Florida street address of the registered agent and office are:	
	C T Corporation System	
•••	(Nante)	
	1200 South Pine Island Road	
_	Florida Street Address (F.O. Box NOT ACCEPTABLE)	
	Plantation, Florida 33324	
_	City/State/Zip	
liability company agent and agree to relating to the pro	ed as registered agent and to accept service of process for the above stated at the place designated in this certificate, I hereby accept the appointment of act in this capacity. I further agree to comply with the provisions of all oper and complete performance of my duties, and I am familiar with and position as registered agent as provided for in Chapter 608, Florida State T Corporation System. (Signature) (Signature)	mt as registered I statutes accept the



I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "CVS 5172 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 FIRST DAY OF NOVEMBER, A.D. 2005.

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

4053940 8300 050892259

Harriet Smith Windsor, Secretary of State
AUTHENTICATION: 4267338

DATE: 11-01-05