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LORIDA/FOREIGN LIMITED LIABILITY CO.

CVS 3257 FL, L.L.C.

Certificate of Status	0
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APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLAINCE WITH SECTION BORSON, FLORIDA STATUTES. THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA: 1. CVS 32\$7 Ft., L.L.C. (Name of foreign limited liability company) 2. Delaware (FEI mimber, if applicable) (Jurisdiction under the law of which foreign limited liability 5. perpetual (Duration: Year limited liability company will cease to (Date of Organization) exist or "perpenual") (Date first transacted business in Florida, (See sections 603.501, 608.502, and 817.155, 7.9.) 7. One CVS Drive Woonsocket RT 02895 (Street address of principal nince) 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 10. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having outnoty of records in the jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a fixeign language, a translation of the certificate trader outh of the translator transl be submitted.) 1). 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. I'm accordance with section 608.408(3), P.S., the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.) Molanie K. Luker Asst. Scoretary of CVS Pharmacy, Inc. (Member)

Typed or printed name of signee

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1. The name of the Limited Liability Company is:

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.

CVS 3257 FL, L.L.C.	
2. The name and the Florida street address of the registered agent and office are:	YAL SEC
C T Corporation System	AR PR
(Name)	ASSEE
1200 South Pine Island Read	
Florida Street Address (P.O. Box NOT ACCEPTABLE)	- For 9
	ATE ORIDA
Plantation, Florida 33324	
City/State/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 508, Florida Statutes.

(Signature)
Kristen Betzger

Vice President

\$ 100.00 Filing Fee for Application

\$ 25.00 Designation of Registered Agent

\$ 30.00 Certified Copy (optional)

\$ 5.00 Certificate of Status (optional)

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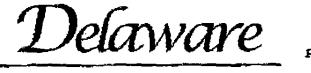
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The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREEY CERTIFY "CVS 3257 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 SEOW, AS OF THE TENTH DAY OF APRIL, A.D. 2006.

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



Warriet Smith Hindson

AUTHENTICATION: 4655\$\$1

DATE: 04-10-06

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