

Division of Corporations Public Access System

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Division of Corporations

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LORIDA/FOREIGN LIMITED LIABILITY CO.

CVS 8902 FL, L.L.C.

Certificate of Status	.0
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JUL 1 0 2008

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:

LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE	OF FLORIDA:	
1. CVS 8902 FL, L.L.C.		
(Name of Foreign Limited Liability Company; must include "Lim	nited Liability Company," "L.L.C.," or "LLC.")	
(If name unavailable, enter alternate name adopted for the purpose of tra consent of the managers or managing members adopting the alternate na Company," "L.L.C.," "LLC.")		
3 .	870365	
(Jurisdiction under the law of which foreign limited liability company is organized)	(FEI number, if applicable)	
4. 6/23/08 5. Perp		
(Date of Organization) (Du	uration: Year limited liability company will cease to st or "perpetual")	
6. (Date first transacted business in Florida, if	prior to registration	
(See sections 608.501 & 608.502 F.S. to deter	rmine penalty liability)	
7. One CVS Drive, Woonsocket, RI 02895		<u>.</u>
	8	
(Street Address of Princ	ipal Office)	77-7
B. If limited liability company is a manager-managed compa	any sheek here	
a. If finited hability company is a manager-managed compa	any, check here	
9. The name and usual business addresses of the managing t	members or managers are as follows:	
CVS Pharmacy, Inc., Sole Member	গু	<u> </u>
One CVS Drive, Woonsocket, RI 02895	• "	7
10. Attached is an original certificate of existence, no more than 90 days old,	duly authenticated by the official having custody of reco	ni sbrc
the jurisdiction under the law of which it is organized. (A photocopy is not a	occeptable. If the certificate is in a foreign language, a	
ranslation of the certificate under oath of the translator must be submitted.)		
11. Nature of business or purposes to be conducted or promo	oted in Florida: Real estate acquisition	
1 . /		
duling	······································	
Signature of a member of an authorize (In accordance with section 608,408(3), F.S., the ex-	xecution of this document constitutes	
an affirmation under the penalties of perjucy that the Melanic K. Luker, Assistant Secretary of Sole		
Typed or printed name		

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.

1. The name of the Limited Liability Compa	iny is:	
CVS 8902 FL, L.L.C.		
If name unavailable, the alternate name to be	used in the state	e of Florida is:
2. The name and the Florida street address of	f the registered	agent and office are:
cr	Corporation System	1
	(Name)	
1200 \$	outh Pine Island Ro	ad
Florida Street Addr	ess (P.O. Box NO	[ACCEPTABLE)
Plantation	FL	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 608, Florida Statutes.

Kristen Betzgere)
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)

Delaware

DACE :

The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "CVS 8902 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 SEVENTH DAY OF JULY, A.D. 2008.

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

4565521 8300

080750546

You may verify this costificate obline at corp.delaware.gov/authver.shtml Varnet Smile Hinden

Harriet Smith Windson, Secretary of State
AUTHENTICATION: 6709075

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DATE: 07-07-08