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Division of Corporations

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ORIDA/FOREIGN LIMITED LIABILITY CO.

CVS 1114 FL, L.L.C.

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D. BRUCE

AUG 28 2008

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

IN COMPLIANCE WITH SECTION 608503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA: CVS 1114 FL, L.L.C. (Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.") (If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the written consent of the managers or managing members adopting the alternate name. The alternate name must include "Limited Liability Company," "L.L.C.," "LLC.") 2. Delaware (Jurisdiction under the law of which foreign limited liability (FEI number, if applicable) company is organized) 8/22/2008 perpetual 4. (Date of Organization) (Duration: Year limited liability company will sease to exist or "perpensal") (Date first transacted business in Florids, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability) 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 name and usual business addresses of the managing members or managers are as follows: CVS Pharmacy, Inc., Sole Member 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 custody of records in the jurisdiction under the law of which is to openized. (A photocopy is not acceptable. If the certificate is in a foreign language, a translation of the certificate under oath 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.) Melanie K. Luker, Assistant Secretary of Solo Member

Typed or printed name of signee

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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.

	e Limited Liability Com	pany is:		
If name unavailabl	e, the alternate name to b	oe used in the state o	f Florida is:	
2. The name and the	ne Florida street address	of the registered age	ent and office are:	
	c n	Corporation System		*
	(Name)			
	1200 South Pine Island Road			
	Florida Street Add	iress (P.O. Box NOT AC	Ceptable)	AR ASS
	Plantation	וק	33324	GG ₹
		City/State/Zlp		_ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~
liability company at agent and agree to a relating to the prope	as registered agent and the place designated in the city. I further and complete performantion as registered agent	his certificate, I h <mark>e</mark> red her agree to comply v ince of my duties, and	by accept the appointm with the provisions of t I am familiar with an	nent as registered all statutes ad accept the
By: Whomas Kristen Betzon	Comparation System (Signature)	4		
Vice Presider	\$ 100.00 \$ 25.00 \$ 30.00	Filing Fee for App Designation of Re Certified Copy (a)	gistered Agent	

Certificate of Status (optional)

5.00

Delaware

The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "CVS 1114 FL, L.L.C." IS DULY FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND RAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE TWENTY-SECOND DAY OF AUGUST, A.D. 2008.

4591150

080894665

AUTHENTICATION: 6808835

DATE: 08-22-08