

M08000004598

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

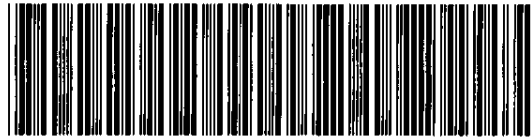
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

B. KOHR  
MAR - 1 2011  
EXAMINER

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
11 FEB 28 PM 1:25



CORPORATION SERVICE COMPANY

ACCOUNT NO. : I20000000195

REFERENCE : 686879 4702925

AUTHORIZATION :

COST LIMIT : \$ 25.00

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
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ORDER DATE : February 24, 2011

ORDER TIME : 9:19 AM

ORDER NO. : 686879-010

CUSTOMER NO: 4702925

CHANGE OF AGENT

NAME: SCP 2010-C36-006 LLC

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

\_\_\_\_ CERTIFIED COPY  
XX \_\_\_\_\_ PLAIN STAMPED COPY

CONTACT PERSON: Jeanine Reynolds

EXAMINER'S INITIALS: \_\_\_\_\_

**STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR  
LIMITED LIABILITY COMPANY**

*Pursuant to the provisions of sections 608.416 or 608.508, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.*

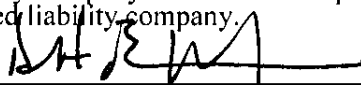
1. Name of the limited liability company: SCP 2010-C36-006 LLC
2. (a) Principal office address of limited liability company: \_\_\_\_\_  
(Note: **MUST BE STREET ADDRESS**) One CVS Drive  
Woonsocket, RI 02895
- (b) Mailing address of limited liability company: \_\_\_\_\_  
(Note: **MAY BE POST OFFICE BOX**) One CVS Drive  
Legal Department  
Woonsocket, RI 02895

- October 14, 2008 M08000004598
3. Date of filing/registration in Florida 4. Document number

5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State:
- Registered Agent: C T Corporation System
- Registered Office Address: 1200 South Pine Island Road  
Plantation, FL 33324

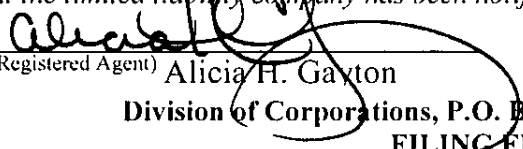
- (b) Enter name of **NEW Registered Agent** and/or **NEW Registered Office address**:
- NEW Registered Agent:** Alicia H. Gayton
- NEW Registered Office Address:** 8441 Cooper Creek Boulevard  
(**MUST BE FLORIDA STREET ADDRESS**) University Park, FL 34201

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

  
(Signature of a member or authorized representative of a member)

David Baldauf, Authorized Representative  
(Printed or typed name of signee)

*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 relative 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. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.*

By:   
(Signature of Registered Agent) Alicia H. Gayton

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314  
**FILING FEE: \$25.00**

FILED  
SECRETARY OF CORPORATIONS  
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