

## Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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Division of Corporations

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#### Foreign Limited Liability Company CVS 1126 FL, L.L.C.

Certificate of Status	0
Certified Copy	0
Page Count	05
Estimated Charge	\$125.00

B. BOSTICK

APR 12 2011

EXAMINER

#### **COVER LETTER**

SUBJE		,	,
		Name of Limited Liability Company	•
The encl Existance	ased "Application by Fareign Limited L e, and aheck are submitted to register th	iability Company for Authorization to Transact Business in a above referenced foreign limited liability company to trans	Plorida," Certificate of act business in Florida
Please re	turn all correspondence concerning this	matter to the following:	
	Olga Hinkel		
		Name of Person	
	All All and Al	•	
	CT Corporation System	Firm/Company	
	,	· ·	
	155 Federal Street, Suite 700		
		Address	<del>-</del> .
	Boston, MA 02110		
		City/State and Zip Code	<del>1</del> .
	mkluker@cvs.com		SEL 1
	E-mail address	: (to be used for future annual report notification)	A PR
For furth	er information concerning this matter, p.	ease call:	SE I
(	Olga Hinkel	at (617 ) 531-5822	
•	Name of Person	Area Code & Daytime Telephone Number	
1	MAILING ADDRESS: Division of Corporations Registration Section P.O. Box 6327 Fallahassec, PL 32314	STREET ADDRESS: Division of Corporations Registration Section Clifton Building 2661 Executive Center Circle Tallahasses, FL 32301	7:41 STATE FLORIDA

# 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 BURINESS IN THE STATE OF FLORIDA.

	CVS 1126 FL, L.L.C.  (Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")	-
ĊO	name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the assent of the managers or managing members adopting the alternate name. The alternate name must include "Limited Liab mpany," "L.L.C." "LLC.")	written
2,	Delawarc 3, 27-3041958	_
	(Jurisdiction under the law of which foreign limited liability (FEI number, if applicable) company is organized)	-
4.	06/16/2010 5 Perpetual	
-	(Date of Organization) (Duration: Year limited liability company will cease to exist or "perpetual")	-
б.		
	(Date first transacted business in Florida, If prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability)	•
7.	One CVS Drive	_
	Woonsucket, RI 02895	
	(Street Address of Principal Office)	•
3.	If limited liability company is a manager-managed company, check here	
),	The name and usual business addresses of the managing members or managers are as follows:	APR
	CVS Pharmacy, Inc.	
	To.	3
	One CVS Drive	حد است
	Woonsocket, RY 02895	<del>;-</del>
È,	Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of recipulation under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, a slation of the certificate under oath of the translator must be submitted.)	ords in
1.	Nature of business or purposes to be conducted or promoted in Florida:	
	Real estate acquisition	•
	Thelanus place	
	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. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in a.817.155, F.S.)	
	Melanie K. Luker, Assistant Secretary of Sole Member	

Typed or printed name of signee

# 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 1126	FL, L.L.C.		·····
If unavail	able, the alternate to be used	in the state of Florida is:	
2. The na	me and the Florida street add	ress of the registered agent and office are:	<del></del>
	C T Corporation System	·	<del>-1</del> .
		(Name)	PC 1
	1200 South Pine Island Rose	d	AR PR
	Florida Street	t Address (P.O. Box <u>NOT</u> ACCEPTABLE)	SSE
	Plantation .	FL 33324	
		City/State/Zip	TATE ORIO
liability con agent and c relating to	mpany at the place designated agree to act in this capacity. I the proper and complete perfo	and to accept service of process for the above sto In this certificate, I hereby accept the appointm further agree to comply with the provisions of a armance of my duties, and I am familiar with and agent as provided for in Chapter 608, Florida Sto	ent as registered all statutes d accept the

\$ 100.00 Filing Fee for Application \$ 25.00 Designation of Registered Agent

Kristen Betzger Vice President

\$ 30.00 Certified Copy (optional)

C T Corporation System

By:

\$ 5.00 Certificate of Status (optional)

# Delaware

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### The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "CVS 1126 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 THIRTY-FIRST DAY OF MARCH, A.D. 2011.

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

SECRETARY OF STATE

4837095 8300

110366493

ou may verify this certificate online t corp. delaware. gov/authver. shtml

AUTHENTICATION: 8663614

DATE: 03-31-11