114000001253

(R	equestor's Name)					
(A	ddress)					
(A	ddress)					
(C	ity/State/Zip/Phone #)					
PICK-UP	WAIT MAIL					
(B	usiness Entity Name)					
(Document Number)						
Certified Copies	Certificates of Status					
Special Instructions to	o Filing Officer:					

Office Use Only



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12/22/17--01026--001 ++25.00

PILLL
2017 DEC 22 PM 6: 57
SECRETARY OF STATE.

K. SALY DEC 26 2017



CSC - WILMINGTON
251 Little Falls Drive
Wilmington De 19808

800-927-9800 302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Ashley Seeman ashley.seeman@cscglobal.com

Date: December 20, 2017

Order#: 973399-004

Re: SAND PHARMACY JUPITER 10504 LLC

Enclosed please find:

XX Change of Registered Agent and Office.

XX Check in the amount of \$25.00.

Please take the following action:

XX File in your office on a routine basis.

XX Issue Proof of Filing.

XX Please return evidence to the following:

Attn: Ashley Seeman c/o Corporation Service Company 251 Little Falls Drive Wilmington, DE 19808

XX Return envelope is also enclosed for your convenience.

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

OUCA.XCOA

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

Pursuant to the provisions of sections 605.0114 or 605.0116, 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. N	ame of the limited liability company: SAND PHARMA	CY JUPI	TER 10504	LLC			
2. (a)	One CVS Drive Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	(b) 	One CVS Drive Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)				
	Woonsocket, Rt 02895		Woonsocket, RI 02895				
2	02/24/2014	, -	M1400000				
3.	Date of filing/registration in Florida	4.		Document number			
5 (a)							
	Registered Agent and Registered Office shown on the records of th	e Florida .	Dept. of State:				
	1200 South Pine Island Road						
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS)			ŞLÜ TÄLL <i>ı</i>	SLC:	2017 0	, <u></u>
	Plantation . FI	33324			H.A.	OEC	
(b)	Corporation Service Company Enter name of NEW Registered Agent and/or NEW Registered Office address: 1201 Hays Street NEW Registered Office Address:			DEC 22 PM 6: 57 ARE FARY OF STATE AHASSEEL FLORIDA			
	Tallahassee , FL_	32301					
the cha agent v was/wa	imited liability company is not organized under the lawsinge or changes are made, the Florida street address of twill be identical. Or, in the case of a Florida limited liabere authorized by an affirmative vote of the members of icles of organization or the operating agreement of the li	he regist pility cor the limi	ered office npany, it is led liability	and the business of hereby confirmed company or as oth	ffice of that the	the reg	gistered e(s)
/s/	Jay D. Stein	Jay C). Stein, Ma	nager			
Signa	ture of a member or authorized representative of a member			Printed or typed name	of signee	:	
provisi the obt to mer	by accept the appointment as registered agent and agre- ions of all statutes relative to the proper and complete p ligations of my position as registered agent as provided ely reflect a change in the registered office address, I he d in writing of this change.	e to act i performa for in Ci preby coi	n this capa nce of my d hapter 605, nfirm that th	city. I further agre uties, and I am fam F.S. Or, if this do he limited liability	e to co niliar w cument compar	mply w ith and is bein iy has i	ith the accept g filed Seen
Signatu	re of Registered Agent Corporation Service Company	BY: Gr	ace E. Kirt	y, Assistant Vice	Presio	lent	