

https://efile.sunbiz.org/scripts/efilecovr.exe[9/7/2017 12:13:38 PM]

**Milligan, Michelle**

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**From:** Batson, Constance <Constance.Batson@wolterskluwer.com>  
**Sent:** Monday, September 18, 2017 11:10 AM  
**To:** Milligan, Michelle  
**Subject:** RE: CVS 3667 FL LLC FL

Good morning Michelle,

Here is the transmittal receipt stating that it went through successfully on 9-7.

Thanks!

-----Original Message-----

**From:** send@mail.efax.com [mailto:send@mail.efax.com]  
**Sent:** Thursday, September 07, 2017 12:19 PM  
**To:** Batson, Constance <Constance.Batson@wolterskluwer.com>  
**Subject:** Successful transmission to 18506176383. Re: CVS 3667 FL LLC FL

Dear Kimberly Laughrey,

Re: CVS 3667 FL LLC FL

The 5 page fax you sent through eFax Solutions to 18506176383 was successfully transmitted at 2017-09-07 16:18:53 (GMT).

The length of transmission was 169 seconds.

The receiving machine's fax ID: 850-617-6381.

If you need additional assistance, please visit our online help center at <https://www.efaxcorporate.com/corp/twa/page/customerSupport>. Thank you for using the eFax Solutions service.

Best Regards,

eFax Solutions

Customer Service

Help: <https://www.efaxcorporate.com/corp/twa/page/customerSupport>

Tel: 1-323-817-3202

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

IN COMPLIANCE WITH SECTION 605.002, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

1. CVS 3667 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. The alternate name must include "Limited Liability Company," "L.L.C.," or "LLC.")

2. Delaware

(Jurisdiction under the law of which foreign limited liability company is organized)

3. \_\_\_\_\_

(FEI number, if applicable)

4. \_\_\_\_\_

(Date first transacted business in Florida, if prior to registration)  
(See sections 605.0901 & 605.0905, F.S. to determine ready liability)

5. One CVS Drive

(Street Address of Principal Office)

Woonsocket, RI 02895

6. One CVS Drive

(Mailing Address)

Woonsocket, RI 02895

7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: C T Corporation System

Office Address: 1200 South Pine Island Road

Plantation

(City)

, Florida 33324

(Zip code)

## Registered agent's acceptance:

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 application, 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.

By: \_\_\_\_\_

C T Corporation System

Olga Hinkel - VP

(Registered agent's signature)

8. The name, title or capacity and address of the person(s) who has/have authority to manage is/are:

Title or Capacity:

Name and Address:

Title or Capacity:

Name and Address:

Secretary

Melanie K. Luker

One CVS Drive

Woonsocket, RI 02895

(Use attachments if necessary)

9. Attached is a 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 it is organized. (If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted)

10. This document is executed in accordance with section 605.0203 (1) (5), Florida Statutes. 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 s.817.155, F.S.

Melanie K. Luker  
(Signature of an authorized person)

Melanie K. Luker

(Typed or printed name of signer)

# Delaware

The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF  
DELAWARE, DO HEREBY CERTIFY "CVS 3667 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 SEPTEMBER, A.D. 2017.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE BEEN  
ASSESSED TO DATE.



6534478 8300

SR# 20176053719

You may verify this certificate online at [corp.delaware.gov/authver.shtml](http://corp.delaware.gov/authver.shtml)

A handwritten signature of Jeffrey W. Bullock in black ink, written over a horizontal line. Below the line, the text "Jeffrey W. Bullock, Secretary of State" is printed.

Jeffrey W. Bullock, Secretary of State

Authentication: 203179974

Date: 09-07-17