

## P15366

ACCOUNT NO. :

072100000032

REFERENCE

690035

4338223

AUTHORIZATION

COST LIMIT

\$ 35.00

PM #: 25

ORDER DATE: August 2, 2002

ORDER TIME : 10:08 AM

ORDER NO. : 690035-410

100006306841--8

CUSTOMER NO:

4338223

CUSTOMER: Ms. Julie Backe

Albertson's, Inc. 250 Parkcenter Blvd.

Po Box 20 Boise,, ID 83706

CHANGE OF AGENT

NAME:

OSCO DRUG, INC.

OZ AUG -5 PM 3. 59
DIVISION OF CORPORATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY

XX \_\_\_ PLAIN STAMPED COPY

CONTACT PERSON: Ellyn Herndon

C. Coulliste AUG 0 5 2002

## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

	ed under the laws of the State of Delaware	and the same of th
submits the following statement in or	der to change its registered office or registered agent, or both, in	
the State of Florida.		
1. The name of the corporation:	and the second s	- · · · · · · · · · · · · · · · · · · ·
OSCO DRUG, INC.		المناوية المناوية المناوية
2. The mailing address of the corporat	tion: 250 Parkcenter Blvd PO Box 20	
Boise, ID 83726		
3. Date of incorporation/qualification	Document number: P15366	
4. The name and address of the curren	nt registered agent and office:	
CT Corporation Syst		. —
1200 South Pine Isl		e, fi
Plantation, FL 333	24	: 10 T
5. The name and address of the new i	registered agent (if changed) and/or registered office (if exampled):  (P. O. Box Not Acceptable)	
1201 Hays Street		· <del>-</del>
Tallahassee, FL 3	The state of the s	<del></del>
agent, as changed, will be identical.	ffice and the street address of the business office of its registered	
Such change was authorized by reso authorized by the board.	slution duly adopted by its board of directors or by an officer so	
40 mg P 0 2 3	7/31/02	
(Signature of an officer, chairman or v	ice chairman of the board) (Date)	
Laura R. Dunlap, Attorney in Fact (Printed or typed nam		
I further agree to comply with the performance of my duties, and I am registered agent.	gent and to accept service of process for the above stated pointment as registered agent and agree to act in this capacity. rovisions of all statutes relative to the proper and complete familiar with and accept the obligation of my position as	
Corporation Service Company	81212002	3:
(Signature of Registered Age		75 . Lance
If signing on behalf of an entity:	Deborah D. Skipper Asst. V. Pres.	
(Typed or Printed Name)	(Capacity)	a see and see
*	* * FILING FEE: \$35.00 * * *	

P.O. Box 6327

TALLAHASSEE, FL 32314

CR2E045(9/00)

DIVISION OF CORPORATIONS