No. W 54423		Due no later than Sep 30, 2012		2	2. Registered Agent and Address (NO PO BOX)			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		Annual Report Form 1. Mailing Address: Correct in this box if needed. MEDCO HEALTH, L.L.C. 100 PARSONS POND DRIVE FRANKLIN LAKES NJ 07417 USA			CT CORPORATION SYSTEM 1111 W JEFFERSON STE 530 BOISE ID 83702 USA 3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE 4. Limited Liability Companies: Enter Nar		mes and Addresses of at	laast one Member or Manager					
Office Held Nar		nies and Addresses of at	Street or PO Address		City	State	Country	Postal Code
MANAGER JEFFREY L HA		HALL	100 PARSONS POND DRIVE		FRANKLIN LAKES		USA	07417
5. Organized Under the Laws of: ID W 54423		6. Annual Report must be signed.* Signature: Traci Houck				ate: 08/0	•	
		Name (type or print): Traci Houck Title: Poa * Electronically provided signatures are accepted as original signatures.						