No. C 144486		Due no later than Jun 30, 2013 Annual Report Form 1. Mailing Address: Correct in this box if needed. MEDCO HEALTH SOLUTIONS, INC. 100 PARSONS POND DRIVE FRANKLIN LAKES NJ 07417 USA		2. Registered A	Registered Agent and Address (NO PO BOX) CORPORATION SERVICE COMPANY 12550 W EXPLORER DR STE 100 BOISE ID 83713 USA 3. New Registered Agent Signature:*			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE				12550 W EXI BOISE ID 8 USA				
4. Corporations: Enter Nam	nes and Busin	ess Addresses of	f President, Secretary, and Directors. Treasur	rer (optional).				
Office Held	Name		Street or PO Address	City	State	Country	Postal Code	
DIRECTOR	KEITH J. EBLING		ONE EXPRESS WAY	ST. LOUIS	MO	USA	63121	
	JEFFREY L. MARTIN P.		ONE EXPRESS WAY ONE EXPRESS WAY	ST. LOUIS ST. LOUIS	MO MO	USA USA	63121 63121	
	JEFFREY L.		ONE EXPRESS WAY	ST. LOUIS	MO	USA	63121	
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
DE C 144486		Signature: M		Date: 06/24/2013				
		Name (type or print): Martin P. Akins			Title: Secretary			
Processed 06/24/2013	* Electronically provided signatures are accepted as original signatures.							