

State of Idaho

Office of the Secretary of State

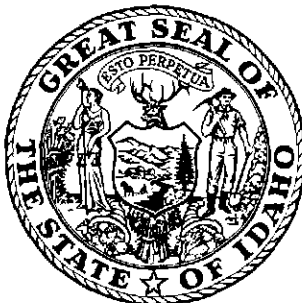
**CERTIFICATE OF REGISTRATION
OF
MINUTECLINIC TELEHEALTH SERVICES, LLC**

File Number W 204777

I, LAWERENCE DENNEY, Secretary of State of the State of Idaho, hereby certify that an application for Foreign Registration Statement, duly executed pursuant to the provisions of the Idaho Uniform Business Organization Code, has been received in this office and is found to conform to law.

ACCORDINGLY and by virtue of the authority vested in me by law, I issue this Certificate of Registration to transact business in this State and attach hereto a duplicate of the application for such certificate.

Dated: July 10, 2018



Lawrence Denney
SECRETARY OF STATE

By *[Signature]*



FOREIGN REGISTRATION STATEMENT

Title 30, Chapter 21, Idaho Code

Filing fee: \$100 typed, \$120 not typed

Complete and submit the form in duplicate.

2018 JUL 10 PM 2:09

SECRETARY OF STATE
STATE OF IDAHO

1. The name of the entity is: MinuteClinic Telehealth Services, LLC
2. The name which it shall use in Idaho is: MinuteClinic Telehealth Services, LLC
(Enter a name here, only if you are required to adopt an alternate name)
3. Select the type of entity you wish to register:

<input type="checkbox"/> Business Corporation	<input type="checkbox"/> General Partnership
<input type="checkbox"/> Nonprofit Corporation	<input type="checkbox"/> General Cooperative Association
<input type="checkbox"/> Limited Liability Partnership	<input type="checkbox"/> Limited Partnership (Including a limited liability limited partnership)
<input checked="" type="checkbox"/> Limited Liability Company	<input type="checkbox"/> Statutory Trust, Business Trust, or Common-law Business Trust
- ☐ Other: _____
(Use "Other" only if your foreign entity type is not listed above, and enter the type here.)
4. Jurisdiction of formation: Delaware
(Provide the domestic jurisdiction where the entity was formed)
5. The address of its principal office is:
One CVS Drive, Woonsocket, RI 02895
(Street Address)

(Mailing Address, if different)
6. The address of its domestic principal office (if required by the laws of the jurisdiction of formation) is:

(Street Address)

(Mailing Address, if different)
7. The mailing address to which correspondence should be addressed, if different from item 5, is:

(Address)
8. Name and street address of registered agent in Idaho:
C T Corporation System 921 S Orchard St, Suite G, Boise, ID 83705
(Name) (Address)
9. The name, capacity, and mailing address of at least one governor:

<u>MinuteClinic, L.L.C.</u>	<u>Sole Member</u>	<u>One CVS Drive, MC 1160 Woonsocket, RI 02895</u>
(Name)	(Capacity)	(Address)
_____ (Name)	_____ (Capacity)	_____ (Address)

Typed Name: Kimberley M. DeSousa

Signature: _____

Capacity: Member, MinuteClinic, L.L.C., Sole Member

Secretary of State use only

IDAHO SECRETARY OF STATE

07/10/2018 05:00

CK: PREPAID CT: 278665 BH: 1652884
1@ 100.00 = 100.00 FOR REG ST #2
1@ 20.00 = 20.00 EXPEDITE C #3

W204777

Delaware

The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF
DELAWARE, DO HEREBY CERTIFY "MINUTECLINIC TELEHEALTH SERVICES, LLC"
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 FIRST DAY OF JUNE, A.D. 2018.

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



6826660 8300

SR# 20184884592

You may verify this certificate online at corp.delaware.gov/authver.shtml

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

Authentication: 202806021

Date: 06-01-18