No. <b>W 54423</b>		Due no later than Sep 30, 2011		2. Registered Ager	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		1111 W JEFFER BOISE ID 837 USA	CT CORPORATION SYSTEM 1111 W JEFFERSON STE 530 BOISE ID 83702			
NO FILING FEE IF RECEIVED BY DUE DATE								
4. Limited Liability Companies: Er	ter Name	s and Addresses o	of at least one Member or Manager.					
Office Held Name			Street or PO Address	City	State	Country	Postal Code	
MANAGER RICHA	TH O KL RD J RU AS M M		100 PARSONS POND DRIVE 100 PARSONS POND DRIVE 100 PARSONS POND DRIVE	Franklin Lakes Franklin Lakes Franklin Lakes	NJ	USA USA USA	07417 07417 07417	
5. Organized Under the Laws of:		. Annual Report m						
ID		Signature: Michelle Donato		Date: 09/15/2011				
W 54423		Name (type or print): Michelle Donato		Title: Poa				
Processed 09/15/2011	9/15/2011 * Electronically provided signatures are accepted as original signatures.							