

COMMONWEALTH OF KENTUCKY MICHAEL G. ADAMS, SECRETARY OF STATE 0573303.06

mmoore ASN

Michael G. Adams **Kentucky Secretary of State** Received and Filed: 5/24/2024 10:37 AM Fee Receipt: \$20.00

Division of Business Filings Business Filings P.O. Box 718, Frankfort, KY 40602	Certificate of Assumed (Domestic or Foreign Busin	ed Name			ASN
(502) 564-3490 www.sos.ky.gov					
	5 365, the undersigned applies t eens Mail Service #03397	o assume a nar	ne and, for that pu	irpose, submits the	
<ol> <li>The assumed name is:</li> <li>The name of the business enti</li> </ol>	ty (and in the case of general na	artnership the r	 partners) that is/ar	e adopting the assu	med
	ty (and in the case of general po	,	, 2, 2, 1	, ,	
name: Walgreens Mail Service, LLC					
Name must be identical to the nam	e on record with the Secretary o	f State.)			
a Domestic Limited a Domestic Busine a Domestic Corpor a Domestic Limited a Domestic Statuto a Domestic Limited	al Partnership d Liability Partnership d Partnership ess Trust ration d Liability Company ory Trust d Cooperative Association orporated Non-profit Association	a Forma For	•	ity Partnership ership st ity Company	iation 
5. The mailing address is:					
7003 Presidents Drive, Suit	te 260	Orlando	FL	32809	
Street Address or Post Office Box	Numbers	City	State	Zip	
I declare under penalty of perjury	under the laws of Kentucky tha	at the forgoing is	s true and correct.		
Ru Pe Il	Richard Gates	Presid	lent and Manager		-=
Authorized Party Signature	Printed Name		Title	Date	

Authorized Party Signature