



State of Rhode Island  
Department of State - Business Services Division


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## Fictitious Business Name Statement

DOMESTIC or FOREIGN Business Corporation

→ Filing Fee: \$50.00

Pursuant to the provisions of RIGL 7-1.2-402, the undersigned business corporation hereby submits the following statement for authority to transact business in the state of Rhode Island under a fictitious business name:

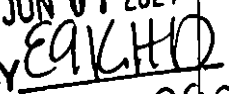
1. Entity ID Number: <b>000054660</b>		2. The name of the Corporation is: <b>Walgreen Eastern Co., Inc.</b>	
3. The fictitious business name to be used is: <b>Walgreens Specialty Pharmacy #21185</b>			
4. The corporation is organized under the laws of: <b>NY</b>		5. The date of incorporation is: <b>02/23/1921</b>	
6. The address of its registered office within Rhode Island is: Street Address <b>c/o Corporation Service Company, Registered Agent, 222 Jefferson Blvd., Suite 200</b>			
City <b>Warwick</b>		State <b>RHODE ISLAND</b>	Zip <b>02888</b>
7. The business in which it is engaged: <b>The business provides Specialty Pharmacy prescription services for patients with chronic, complex or rare conditions.</b>			
8. Applicant is otherwise authorized to do business in the state of Rhode Island.			
9. <i>Under penalty of perjury, I declare and affirm that I have examined this Fictitious Business Name Statement and that the information contained herein is true and correct.</i>			
Name of Authorized Officer of the Corporation <b>Brian Brown, Secretary</b>			Date <b>June 5, 2024</b>
Signature of Authorized Officer of the Corporation X 			

### MAIL TO:

Division of Business Services  
148 W. River Street, Providence, Rhode Island 02904-2615  
Phone: (401) 222-3040  
Website: [www.sos.ri.gov](http://www.sos.ri.gov)

If you have any questions, please call us at (401) 222-3040, Monday through Friday, between 8:30 a.m. and 4:30 p.m., or email [corporations@sos.ri.gov](mailto:corporations@sos.ri.gov).

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State of Rhode Island

**Department of State | Office of the Secretary of State**

**Gregg M. Amore**, *Secretary of State*

I, GREGG M. AMORE, Secretary of State of the State of Rhode Island,  
hereby certify that this document, duly executed in accordance with the provisions  
of Title 7 of the General Laws of Rhode Island, as amended, has been filed in this

office on this day:

June 07, 2024 12:09 PM

A handwritten signature in black ink, reading "Gregg M. Amore". The signature is fluid and cursive, with the first letters of each word being capitalized.

Gregg M. Amore  
*Secretary of State*

