



State of Rhode Island and Providence Plantations
Office of the Secretary of State

Division Of Business Services
148 W. River Street
Providence RI 02904-2615
(401) 222-3040

Certificate Request Form

Request Information *(Entity Name is only required for a Certificate of Non-Existence)*

ID	ENTITY NAME	CERTIFICATE TYPE
000522405	Alexion Pharmaceuticals, Inc.	Good Standing Certificate

Total Fee: \$22.00

Filer's Contact Information

(Enter a contact name, mailing address and email.)

Contact Name: JENNIFER JOYCE

Business Name: ALEXION PHARMACEUTICALS, INC.

No. and Street: 352 KNOTTER DRIVE

City or Town: CHESHIRE

State: CT Zip: 06410 Country: USA

Contact Phone: (203) 271-8355 ext:

Contact Email: JOYCEJ@ALXN.COM

Please provide an email address to receive an expedited response from us if the filing is rejected for any reason. If no email address is provided, we will respond by mail.