| | State of Rhode | | Fee: \$50.00 | | | |
|---|--|---------------------------------|---------------------|--|--|--|
| 7636 | Office of the Secreta Division Of Business 148 W. River S Providence RI 029 (401) 222-30 | s Services treet 04-2615 | | | | |
| Foreign Business Corporat Annual Report Filing Period: February 1 - May | | | | | | |
| In accordance with R.I.G.L. 7-1. file its annual report within thirty (R.I.G.L. 7-1.2-1501(c&d)) is sub | (30) days after the time pro | escribed by law | | | | |
| ANNUAL REPORT YEAR: 2023 | | | | | | |
| 1. Corporate ID No. 001689 | 9402 | | | | | |
| 2. Name of Corporation Indigo | AG, Inc. | | | | | |
| 3. Street Address Principal Bu | isiness Office: | | | | | |
| No. and Street:500 RUTHECity or Town:CHARLEST | <u>RFORD AVE</u> <u>OWN</u> State: <u>M</u> | <u>A</u> Zip: <u>02129-1647</u> | Country: <u>USA</u> | | | |
| 4. Business Phone No. | | | | | | |
| 5. State of Incorporation | | | | | | |
| State: <u>DE</u> | | | | | | |
| | ARTICLE III | | | | | |
| Enter the six digit NAICS Code Download the list of codes <u>here</u> | | - | | | | |
| <u>541711</u> | | | | | | |
| 6. Brief Description of the Cha | racter of Business Conduc | cted in Rhode Island | | | | |
| RESEARCH & DEVELOPM | ENT | | | | | |
| 7. Names and Addresses of th | e Officers and Directors: | | | | | |
| All officers and directors must be listed. | | | | | | |
| Title | Individual Name First, Middle, Last, Suffix | Address, City or Town, Stat | | | | |

| | , | | |
|-----------|------------------------|--------------------------------|--|
| PRESIDENT | RONALD HOVSEPIAN | 500 RUTHERFORD AVE | |
| | | CHARLESTOWN, MA 02129-1647 USA | |
| TREASURER | STEPHANIE O'LEARY | 500 RUTHERFORD AVE | |
| | | CHARLESTOWN, MA 02129-1647 USA | |
| | | | |
| SECRETARY | PAUL T. DACIER | 500 RUTHERFORD AVE | |
| | | CHARLESTOWN, MA 02129-1647 USA | |
| DIRECTOR | ROBERT BERENDES | 500 RUTHERFORD AVE | |
| | | CHARLESTOWN, MA 02129-1647 USA | |
| DIRECTOR | JOHN F. GEHRING | | |
| Diricoron | | 500 RUTHERFORD AVE | |
| | | CHARLESTOWN, MA 02129-1647 USA | |
| DIRECTOR | PETER INNES | 500 RUTHERFORD AVE | |
| | | CHARLESTOWN, MA 02129-1647 USA | |
| DIRECTOR | STEPHANE BANCEL | 500 RUTHERFORD AVE | |
| | | CHARLESTOWN, MA 02129-1647 USA | |
| DIDEOTOD | | | |
| DIRECTOR | RONALD HOVSEPIAN | 500 RUTHERFORD AVE | |
| | | CHARLESTOWN, MA 02129-1647 USA | |
| DIRECTOR | ANN SIMONDS | 500 RUTHERFORD AVE | |
| | | CHARLESTOWN, MA 02129-1647 USA | |
| DIRECTOR | GEOFFREY VON MALTZAHN | | |
| DIRECTOR | GEOFFRET VON MALTZARIN | 500 RUTHERFORD AVE | |
| | | CHARLESTOWN, MA 02129-1647 USA | |

8. Shares Authorized and Issued

| Class of Stock | Series of Stock | Par Value Per Share | Total Authorized Shares Number of Shares | Total Issued and Outstanding <i>Num of</i> <i>Shares</i> |
|----------------|-----------------|------------------------|--|--|
| CWP | | \$0.0010 | 5,000.00 | 5000 |

9. This report must be executed on behalf of the corporation by an authorized representative. If the corporation is in the hands of a receiver or trustee, this report must be executed on behalf of the corporation by the receiver or trustee.

Signed this 23 Day of March, 2023 at 8:38:25 AM. *This electronic signature of the individual or individuals signing this instrument constitutes the affirmation or acknowledgement of the signatory, under penalties of perjury, that this instrument is that individual's act and deed or the act and deed of the corporation, and that the facts stated herein are true, as of the date of the electronic filing, in compliance with R.I. Gen. Laws § 7-1.2.*

By <u>COTY BACON</u>

Signature of Authorized Representative of the Corporation

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