

2016 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F15000001418

Entity Name: INTERCEPT PHARMACEUTICALS, INC.

Current Principal Place of Business:

450 W.15TH STREET, SUITE 505
NEW YORK, NY 10011

Current Mailing Address:

450 W.15TH STREET, SUITE 505
NEW YORK, NY 10011

FEI Number: 22-3868459

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title P
Name PRUZANSKI, MARK
Address 421 HUDSON ST #212
City-State-Zip: NEW YORK NY 10014

Title VP
Name SHAPIRO, DAVID
Address 5110 VIA AVANTE
City-State-Zip: RANCHO SANTA FE CA 92067

Title S
Name MCMINN, RACHEL
Address 245 10TH AVE, 8E
City-State-Zip: NEW YORK NY 10001

Title T
Name DUNCAN, BARBARA
Address 42 LAKESBORO DRIVE
City-State-Zip: EASTCHESTER NY 10709

Title D
Name SILVERSTEIN, JONATHAN
Address 601 LEXINGTON AVE, 54TH FL
City-State-Zip: NEW YORK NY 10022

Title D
Name AKKARAJU, SRINIVAS
Address 3000 SAND HILL RD 4-250
City-State-Zip: MENLO PARK CA 94025

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: BARBARA DUNCAN

CFO

04/26/2016

Electronic Signature of Signing Officer/Director Detail

Date