

| 1.) CORPORATION NAME: Novartis Vaccines and Diagnostics, Inc. | DUE DATE: 8/31/2012 | | | | |
|---|--|-------|------------|--------|-------|
| 2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: CORPORATION SERVICE COMPANY BANK OF AMERICA CENTER 16TH FLOOR, 1111 EAST MAIN STREET RICHMOND, VA 23219 | SCC ID NO: F1265570 5.) STOCK INFORMATION <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="width: 50%;">CLASS</th> <th style="width: 50%;">AUTHORIZED</th> </tr> <tr> <td>COMMON</td> <td>1,000</td> </tr> </table> | CLASS | AUTHORIZED | COMMON | 1,000 |
| CLASS | AUTHORIZED | | | | |
| COMMON | 1,000 | | | | |
| 3.) CITY OR COUNTY OF VA REGISTERED OFFICE: RICHMOND CITY | | | | | |
| 4.) STATE OR COUNTRY OF INCORPORATION: DE | | | | | |

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 350 MASSACHUSETTS AVENUE
CITY/ST/ZIP: CAMBRIDGE, MA 02139

7.) DIRECTORS AND PRINCIPAL OFFICERS: All directors and principal officers must be listed. An individual may be designated as both a director and an officer.

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| NAME: ANDRIN OSWALD TITLE: PRES/CEO ADDRESS: 350 MASSACHUSETTS AVENUE CITY/ST/ZIP/CO: CAMBRIDGE, MA 02139 | <input checked="" type="checkbox"/> OFFICER | <input checked="" type="checkbox"/> DIRECTOR |
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| NAME: MAUREEN ROGERS TITLE: SECRETARY ADDRESS: 350 MASSACHUSETTS AVENUE CITY/ST/ZIP/CO: CAMBRIDGE, MA 02139 | <input checked="" type="checkbox"/> OFFICER | <input type="checkbox"/> DIRECTOR |
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| NAME: ROBERT PELZER TITLE: DIRECTOR ADDRESS: 350 MASSACHUSETTS AVENUE CITY/ST/ZIP/CO: CAMBRIDGE, MA 02139 | <input type="checkbox"/> OFFICER | <input checked="" type="checkbox"/> DIRECTOR |
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| NAME: DAVID NIETO TITLE: TREASURER ADDRESS: 350 MASSACHUSETTS AVENUE CITY/ST/ZIP/CO: CAMBRIDGE, MA 02139 | <input checked="" type="checkbox"/> OFFICER | <input type="checkbox"/> DIRECTOR |
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| NAME: JONATHAN SYMONDS TITLE: DIRECTOR ADDRESS: 350 MASSACHUSETTS AVENUE CITY/ST/ZIP/CO: CAMBRIDGE, MA 02139 | <input type="checkbox"/> OFFICER | <input checked="" type="checkbox"/> DIRECTOR |
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I AFFIRM THAT THE INFORMATION CONTAINED IN THIS ELECTRONIC REPORT IS ACCURATE AND COMPLETE AS OF THE DATE BELOW AND THAT I AM LEGALLY AUTHORIZED TO SIGN THIS REPORT.

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| /s/ MAUREEN ROGERS | MAUREEN ROGERS, SECRETARY | 7/30/2012 |
| SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT | PRINTED NAME AND CORPORATE TITLE | DATE |

It is a Class 1 misdemeanor for any person to sign a document, which includes this electronic record, that is false in any material respect with the intent that the document be delivered to the Commission for filing.