FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL									
OMB Number:	3235-028								
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0.5

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Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934

	.,				or S	Sectio	n 30(h)	of the Í	nvestme	nt Cor	mpany Act	of 194	10							,
1. Name and Address of Reporting Person* Quimi Daphne					2. Issuer Name and Ticker or Trading Symbol AMICUS THERAPEUTICS INC [FOLD]									Check a	all app		g Per	10% O	wner	
(Last) (First) (Middle) C/O AMICUS THERAPEUTICS 1 CEDAR BROOK DRIVE					3. Date of Earliest Transaction (Month/Day/Year) 04/10/2014										Officer (give title below) VP Finance and			Other (specify below) d Controller		
(Street) CRANBURY NJ 08512 (City) (State) (Zip)					4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person					
		Tabl	e I - Nor	n-Deriv	ative	Sec	curitie	s Ac	quired	, Dis	posed o	f, or	Bene	eficia	ally O	wne	ed			
1. Title of Security (Instr. 3) 2. Transa Date (Month/D			eay/Year) if a		A. Deemed xecution Date, any Month/Day/Year)		Transaction Dispos Code (Instr. 5)		Disposed	ties Acquired (A d Of (D) (Instr. 3,		(A) or 3, 4 ar	nd S E C F	5. Amount of Securities Beneficially Owned Following Reported		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership (Instr. 4)		
									Code	v	Amount		(A) or (D)	Price			ction(s) 3 and 4)			
Common	nmon stock 04/10/2				/2014		A		50,000	0 A \$0		\$ <mark>0</mark> .	50,000		0,000		D			
		Та									sed of, onvertib				y Ow	ned				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date if any (Month/Day/Yea	Date,	Code (Inst				6. Date E Expiration (Month/I	on Dat		Amount of Securities Underlying Derivative Security (Insti and 4)					9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s (Instr. 4)	C F D O (I	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
					Code	v	(A)	(D)	Date Exercisa		Expiration Date	Title	or Nun of	ount nber res	r					

Explanation of Responses:

Remarks:

/s/ Daphne Quimi

04/11/2014

** Signature of Reporting Person

Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

- * If the form is filed by more than one reporting person, see Instruction 4 (b)(v).
- ** Intentional misstatements or omissions of facts constitute Federal Criminal Violations See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB Number.