Power of Attorney

|  |  |
| --- | --- |
| The undersigned shareholder hereby authorizes the below proxy to exercise all my/our rights at the extraordinary shareholders’ meeting in Qlife Holding AB, Reg. No. 559224-8040, on 19 November 2020. | |
| Name of proxy: |  |
| Personal identity number of proxy: |  |
| Address of proxy: |  |
|  |  |
| The proxy’s telephone number during office hours: |  |
| *Please note that the Power of Attorney has to be dated and signed.* | |
| Name/company name of the shareholder: |  |
| Personal identity number/Reg. No. of shareholder: |  |
| Place and date: |  |
| Signature of the shareholder: |  |
| Clarification of signature: |  |