

PROXY FORM

The undersigned shareholder hereby authorizes the below proxy to exercise all my/our rights at the extraordinary general meeting in Qlife Holding AB, Reg. No. 559224-8040, on 8 November 2024.

Name of proxy:

Personal identity number:

Address:

Telephone number during office hours:

Please note that the Power of Attorney has to be dated and signed.

Name of the shareholder:

Personal identity number/Reg. No. of
the shareholder:

Place and date:

Signature of the shareholder:

Clarification of signature:

If the shareholder is a legal entity, authorised representatives must sign the proxy and an up-to-date certificate of registration or similar documents must be attached with the signed proxy.

For information on how your personal data is processed, see

<https://www.euroclear.com/dam/ESw/Legal/Privacy%20Notice%20Boss%20-%20Final%20SWE%20220324.pdf>.