

Power of Attorney

The undersigned shareholder hereby authorizes the below proxy to exercise my/our rights at the annual shareholders' meeting in Polygiene Group AB, Reg. No. 556692-4287, on 8 May 2025.

Name of proxy: _____

Personal identity number of proxy: _____

Address of proxy: _____

The proxy's telephone number during office hours: _____

Note that the Power of Attorney must 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: _____

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