

Power of attorney to a third party proxy

Shareholder number:		name / Company:	
Number of shares:		First name:	
Phone number:* optional details		E-mail address:*	
Provided registration is receized: 24:00 hours (CEST) at the		24:00 hours (CEST) (receipt) at the latest, please return (receipt) by 28 Jun	e 2021,
flatexDEGIRO AG c/o Better Orange I Haidelweg 48 81241 Munich Germany	R & HV AG	E-Mail: flatexdegiro@better-orange.de Telefax: +49 (0)89 889 690 655	
/we hereby authorize, if	necessary by revo	oking a power of attorney already granted at an earlier date, N	Лr./Mrs.
ast name of authorized rep	resentative:		
First name of the authorized	representative:		
Place of residence of the au	thorized representativ	ve:	
of attorney includes the righ	it to grant a sub-power the authorized representation.	g of flatexDEGIRO AG on 29 June 2021 and to exercise the voting right. This er of attorney. I/We shall pass on my/our individual access data to the pase entative and point out to him/her that passing on the access data is only perr	ssword-
Place		Signature(s) or person(s) of declarant (legible)	