

To:
EKTER S.A.
15 Nikis St., Athens 105 57
Shareholders Services Department (Tel. 210 3259 700 / Fax 210 3259 710)

Paid-up Share Capital: €5,850,000.00
Total Number of Shares: 11,250,000
Nominal Value of Share: € 0.52

REVOKE OF AUTHORIZATION

to participate in the Extraordinary General Meeting of 26.02.2021

(Please fill in the missing details or delete those that do not apply)

I, the undersigned:

| FOR NATURAL PERSONS | |
|--|--|
| Surname Name Father's Name ID Card/ Passport Address Contact number | |

| FOR LEGAL ENTITIES | |
|---|--|
| Registered Name Representative Contact TIN Registered offices (address) Contact number | |

Investor Share Code: _____

| Share | Number of Share |
|---|-----------------|
| EKTER S.A. (EKTEP A.E.) GRS222213001 | [•] |

holder of shares/ beneficiary of voting rights* on the above mentioned number of common shares of the company EKTER S.A., hereby **revoke** my authorization to Mr./ Mrs./Messrs. [Name(s)]..... dated/...../202...

| DETAILS OF REPRESENTATIVE(S) | | | |
|------------------------------|-------------------|-------------------|-------------------|
| | REPRESENTATIVE A' | REPRESENTATIVE B' | REPRESENTATIVE C' |
| Surname | | | |
| Name | | | |
| Father's Name | | | |
| Address | | | |
| ID Card/Passport | | | |
| Contact Number | | | |

Date: .../.../202...

The grantor

.....

(Full name for natural persons)

(Registered name and seal for legal entities)

Place authentication of shareholder's signature

by Citizens Service Center (ΚΕΠ)/ Police/ Bank/ Consular Authority

*Delete as appropriate

(Continues in the next page)

IMPORTANT NOTES

(1) The appointment and revocation of a proxy of the shareholder **shall be made in writing and notified to the Company at least forty-eight (48) hours before the date specified for the meeting** to which the appointment refers to.

(2) When a shareholder grants to a Bank an authorization to exercise the voting right in the G.M. of the Company, the provisions of article 128 of Law 4548/2018 apply, mutatis mutandis, to the terms of conditions for granting and revoking said authorization.