

POWER OF ATTORNEY FORM

The proxy stated below, or the person he or she put in his or her place, is hereby authorised to vote for all of the undersigned's shares in OrganoClick AB (publ), reg. no 556704-6908, at the Extraordinary General Meeting of OrganoClick AB (publ) on 5 August 2025.

Proxy

Name of the proxy	Personal identification number/date of birth
Postal address	
Postal code and post town	Telephone number

Signature of the shareholder

Name of the shareholder	Personal identification number/date of birth /corporate identification number
Place and date	Telephone number
Signature*	

* In the case of signing for the firm, a name clarification shall be written next to the signature and the current registration certificate shall be attached to the completed power of attorney form.

Please observe that the shareholders notice of participation at the general meeting must occur in the manner prescribed in the notice to the general meeting, even if the shareholder wishes to exercise his or her voting rights by proxy.

A copy of the completed power of attorney form (with any attachments) should be sent to OrganoClick AB (publ), "EGM", Linjalvägen 9, SE-187 66 Täby, Sweden or by email to ir@organoclick.com, together with the notice of participation. The original version of the power of attorney form shall also be presented at the meeting.