

PROXY DOCUMENT FOR AGM

Efecte Plc's Annual General Meeting on April 30, 2024

The undersigned (hereinafter also the "principal" or "shareholder") authorises the following proxy representative alone (hereinafter also the "proxy representative") to represent himself/herself/itself and vote with his/her/its all shares at Efecte plc's Annual General Meeting on April 30, 2024:

Fill in the name of the proxy representative: _____

Fill in the date of birth of the proxy representative: _____

The completed and signed proxy form shall be delivered primarily as an attachment by e-mail to agm@innovatics.fi or as originals by mail to Innovatics Oy, Yhtiökokous/Efecte Oyj, Ratamestarinkatu 13 A, 00520 Helsinki. Documents must be received by Innovatics on April 22, 2024 at 10 a.m. EET at the latest.

The principal accepts everything that the proxy representative legally does or fails to do under this proxy document. The principal also agrees to the transmission of information in accordance with this proxy document to Efecte Plc and Innovatics Ltd, as well as between these parties, to be used in connection with the Annual General Meeting and the processing of thereto related necessary registrations. A shareholder who is a legal person shall in connection with the delivery of the proxy form deliver evidence of the proxy form signatory's/signatories' right to represent the legal person (for example, a Trade Register extract or a certified copy of a board resolution). Proxy documents in original shall be presented to the company upon request.

Information of the principal:

The personal information provided on this proxy is used to identify a shareholder through a comparison to information in the book-entry system, as well as to confirm shareholdings on the record date of the General Meeting. The personal information will be stored in Innovatics Ltd's database for General Meetings for the Company's use, and information will not be used for any other purposes or for any other General Meetings.

Shareholder's name _____

Date of birth or business ID _____

Address _____

Postal code and town/city _____

Country _____

Phone number _____

E-mail _____

Place and date _____

Signature(s) _____