GENERAL ASSEMBLY OF ATLANTIC GRUPA d.d., ZAGREB

Application for Participation

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| 1. Name and family name, or company name of the shareholder, OIB (personal identification number) of the shareholder |   |
| 2. Residence or seat of the shareholder (street, number, place, state) |   |
| 3. Name and family name, or company name of the proxy, OIB (personal identification number) of the proxy  |  |
| 4. Residence or seat of the proxy (street, number, place, state) |   |
| 5. Name and family name of the person who is under law authorized to sign this application for shareholder  |   |
| 6. Number of shares of the shareholder represented /voted\* |   |
| 7. Account number with the Central Depository and Clearing Company d.d. of the shareholder  |   |

I herewith apply for participation in the General Assembly of Atlantic Grupa d.d. Zagreb, Miramarska 23, convoked for June 15th, 2022, starting at 12:00 hours at Atlantic Grupa registered seat, in Zagreb, Miramarska 23.

\*please mark if the total number of shares of the shareholder or shares on custody account is different then number with which it is voted on General Assembly, or for which proxy is issued. If the number of shares is expected to change, please enter following notice: “according to the number of shares registered on June 8th, 2022”.

Signature of the shareholder/proxy: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_