

Annual General Meeting of MedNation AG on 16 July 2024

**Revocation of proxy given to a third party
Revocation of power of attorney granted and instructions issued to the Company's proxies**

Entrance card number: _____ Name / Company: _____

Number of shares: _____ First name: _____

Phone number:* _____ E-mail address:* _____

* voluntary information

Registration in due time and form by 9 July 2024, 24:00 hrs (CEST) at the latest is required. To be returned **no later than 24.00 hrs. on 15 June 2024 (CEST)** (receipt) to:

MedNation AG
c/o Better Orange IR & HV AG
Haidelweg 48
81241 München
Germany

E-Mail: mednation@linkmarketservices.eu

Please tick unambiguously:

I/We hereby revoke the authorization granted to the Company's proxies for the Annual General Meeting on 16 July 2024.

I/We hereby revoke the authorization for the Annual General Meeting on 16 July 2024 **granted to**

Last name: _____

First name: _____

Place of residence: _____

Place Date Signature(s) or Person making the declaration (legible)