

# POWER OF ATTORNEY AGM 2017 BIOTAGE AB (publ)

Name: \_\_\_\_\_

Pers.reg.no.: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

is hereby authorized to represent and vote for my/our entire holding of shares in Biotage AB (publ) at the Annual General Meeting with the shareholders to be held on April 27, 2016.

\_\_\_\_\_ of \_\_\_\_\_ 2017

Name: \_\_\_\_\_

Printed name: \_\_\_\_\_

Reg.no. / Pers.reg.no.: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

Phone. No.: \_\_\_\_\_

If the power of attorney is issued by a legal entity, a certified copy of the registration certificate for the legal entity shall be enclosed.