

Power of Attorney

The undersigned shareholder hereby authorizes the below proxy to exercise my/our rights at the extraordinary general meeting in SynAct Pharma AB, Reg. No. 559058-4826, on 20 March 2024.

Name of proxy: _____

Personal identity number: _____

Address: _____

Telephone number during office hours: _____

Note that the Power of Attorney must be dated and signed.

Name of the shareholder: _____

Personal identity number/
Reg. No. of the shareholder: _____

Place and date: _____

Signature of the shareholder: _____

Clarification of signature: _____