

I the undersigned,


| | | |
|---|--|---|
| Ms / Mrs / Mr <small>(strike out as appropriate)</small> | Name _____ <small>(For legal entities: surname of the signing party)</small> | Given name _____ <small>(For legal entities: first name of the signing party)</small> |
| Company name _____ | | SIRET _____ <small>(For legal entities)</small> |
| Date and place of birth <input type="text"/> at _____ <small>(DD/MM/YYYY)</small> | | Phone _____ <small>(mandatory)</small> |
| Shareholder number <small>(Account number)</small> <input type="text"/> | E-mail _____ | |
| Address _____ | | |
| Zip code <input type="text"/> | City _____ | Country _____ |

Give irrevocably instructs Uptevia to convert to bearer and transfer the following shares :

| | | | |
|--------------------------------------|-----------------------------|------------------|----------------------|
| Name of the plan ¹ | <input type="text"/> | ISIN Code | <input type="text"/> |
| Number of shares | <input type="text"/> | | |
| | <small>(in words)</small> | | |
| | <input type="text"/> | | |
| | <small>(in figures)</small> | | |

| | |
|---|----------------------|
| Name of the correspondent : | <input type="text"/> |
| Member number with Euroclear France : | <input type="text"/> |
| Beneficiary account number of your bank/broker with this correspondent in France : | <input type="text"/> |
| Name of the manager of the account : | <input type="text"/> |

Forms to be provided:

-  Must be attached : A Bank Account identity (RIB), Postal Account identity (RIP), Savings Account identity (RICE), of the securities account, open in an establishment domiciliated in France, to credit.

By signing the present document, I acknowledge that the liability of Uptevia is limited to the delivery of the securities to the recipient establishment's correspondent in France.

Signed in _____ on _____ Signature : _____