

TRANSFER REQUEST TO BEARER

To be sent to :

Uptevia
Cœur Défense
Service Mouvements
90-110 Esplanade Du Général de Gaulle
92931 Paris La Défense Cedex
FRANCE

FAX: 33 1 40 14 93 90

I the undersigned,

Ms / Mrs / Mr	Name	Given na	me	
(strike out as appropriate)	(For legal entities: surname of the signing par		gal entities: first name of the signing party)	
Company name		SIRET		
-			egal entities)	
Date and place of birth	()		loton)	
	(DD/MM/YYYY)	`		
Shareholder number (Account number)		E-mail		
Adress				
Zip code			Country	
Give irrevocably instru	ucts Uptevia to convert to beare	er and transfer the following	y shares :	_
Name of the plan		IOIN COde		
Number of shares				
runiber of onures	(in words)			
	(in figures)			
Name of the correspondent	t:			
Member number with Euro	clear France :			
	er of your bank/broker with this			
correspondent in France: Name of the manager of the	a account :			
Name of the manager of the	e account .			
Forms to be provided:				
Must be at open in an	tached : A Bank Account identity (RIB), Po establishment domiciliated in France, to o	ostal Account identity (RIP), Savings Accedit.	Account identity (RICE), of the securities account,	
		bility of Uptevia is limited to the	delivery of the securities to the recipient	
establishment's correspo	ndent in France.			
	Signed in	on	Signature :	
				