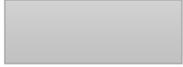


THIS AGREEMENT IS MADE TODAY _____ / _____ / _____**Client's Code:** 

Between **PROCHOICE CHRIMATISTIRIAKI LTD** (Registration No. **HE228429**), having its registered office and contact address at Ariadnis 21, Patsias Court 25, 2nd Floor, office 202 7060 Livadia Larnaca Cyprus, contact telephone no. +35724661192, contact fax +35724662464 (hereinafter called the PROCHOICE or IF"), carrying on the provision of investment and ancillary services in accordance with the relevant authorisation of the Cyprus Securities and Exchange Commission under license number 100/09 and operating as an Investment Firm (IF) on the one part, and

Company Name: _____

With Registration Number: _____ LEI Account: _____

Registered office address: _____

Contact telephone number : _____ Fax number: _____

E-mail address: _____

(Hereafter called the 'Client',) represented by (if applicable please complete also the 'Authorised Representative Appendix'):

Name: _____ with I.D./Passport: _____

And (in case of legal entity represented by two persons)

(a) _____ With ID/Passport: _____

(b) _____ With ID/Passport: _____

Which shall be collectively referred as the 'Parties' and individually as the 'Party' to the Agreement.

WHEREAS

- A. PROCHOICE is a Cypriot Investment Firm (CIF) and pursuant to its CIF licence no 100/09 granted to it by the Cyprus Securities and Exchange Commission it has the right to provide Investment and Ancillary Services in Financial Instruments.
- B. The Client wishes to make use of the services provided by Prochoice and in particular the Services mentioned in **Appendix A**, with regards to Financial Instruments having completed for this purpose all relevant documents, Client Questionnaire which are attached as an integral part of the Agreement.

NOW BY THIS AGREEMENT THE PARTIES AGREE AS FOLLOWS:

- 1. Prochoice agrees to provide to the Client and the Client wishes to be provided with the Investment Services noted in **Appendix A**. **Appendix A** as well as any other of the Appendices of the Agreement may be amended at any time during the life of the present Agreement and any such amendment shall not affect any other terms of this Agreement.
- 2. The Client agrees that the services will be provided in accordance to the **TERMS AND CONDITIONS** of the Agreement which shall be an integral part of it and its Appendices. Furthermore the Appendices and the Politically Exposed Persons Document provided that they are signed, shall become integral parts of the Agreement from the date of their signature.

Initial :

With the signature of the Present Agreement, the Parties agree that Prochoice shall provide to the Client as a minimum, the following Investment Services :

1. Service of **Reception and Transmission of Orders** for the performance of transactions in relation one or more Financial Instruments.
2. Service of **Execution of orders on behalf of clients**, for the performance of transactions in relation one or more Financial Instruments.

The Client solemnly declares that:

1. He has perused and fully understood the whole content of the Terms and Conditions and the relevant Appendices of the Agreement, with which he absolutely and unreservedly agrees and he accepts that he shall be fully bound of them.
2. He has received a copy of the Terms and Conditions of the Agreement and the relevant Appendices prior to the date of the signature of the Agreement and has had the opportunity to receive advice from a lawyer of his choice.

The Parties have signed this Agreement on the date specified below:

CLIENT		
Name and ID/Passport Number	Signature and Company Seal	Date
1. Name: _____ I.D./ Passport No: _____ Capacity: _____ _____ For and on behalf Legal Entity: _____	_____	_____
2. Name: _____ I.D./ Passport No: _____ Capacity: _____ For and on behalf Legal Entity: _____	_____	_____

PROCHOICE CHRIMATISTIRIAKI LTD	Signature	Date
Name: _____ Position : _____	_____	_____

WITNESS:	Signature	Date
Name: _____ I.D./ Passport Number: _____	_____	_____

A.1	PREFERRED METHOD OF COMMUNICATION FOR TRANSACTIONS, STATEMENTS AND VALUATION:
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FAX: <input type="checkbox"/>	POSTAGE: <input type="checkbox"/>	EMAIL: <input type="checkbox"/>
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B. CLIENT DETAILS

A. DETAILS OF 1. THE ULTIMATE BENEFICIAL OWNER 2. AUTHORISED REPRESENTATIVE(S) TO MANAGE THE CLIENT'S ACCOUNT
--

B1. ULTIMATE BENEFICIAL OWNER DETAILS
--

Ultimate Beneficial name:

Education: High school College University Post Graduate Professional Qualifications

Date of Birth:	Place of Birth:	Nationality:
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ID.Card / Passport:	Country of Issue:	ID.Card / Passport Expiry date:
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Percentage in shares:	Annual income from all sources of income:
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Employer (if self-employed state so):	Position:
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Home Address:

Home Tel:	Mobile:	Email:
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Relationship with the client:

Ultimate Beneficial Owner Director Member of the Management Committee

B2. DETAILS OF AUTHORISED REPRESENTATIVE(S) TO MANAGE THE CLIENT'S ACCOUNT

- The Company may accept an Authorised Representative to act on behalf of a client provided that all due diligence requirements have been satisfied.
- The Client must provide details of his Authorised Representative below and shall provide appropriate evidence with regards to such appointment indicating the specific powers and authorities granted to its Authorised Representative (**i.e. through its Article of Association or Board resolution or Power of Attorney**).
- Any appointed Authorized Representative shall be required to complete the **Appendix 1** to enable the Company to assess his appropriateness and suitability with the services and products offered.
- Any order, instruction or notice given by any such duly Authorised Representative shall be deemed to have been given by the Client and the Client shall be fully responsible for all consequences resulting from the fact that the Company has acted pursuant to such order, instruction, or notice.
- The Client always undertakes to inform and keep the Company informed of any changes with respect to this Authorized Representatives throughout the Business Relationship with the Company. Any newly appointed Authorised Representative shall be required to satisfy the Company's due diligence.
- The Company shall in no way be held liable for accepting any instructions by an Authorised Representative or a person who appears to the Company to be an Authorised Representative unless the Client provides prior notification of the termination of such authority as per the provisions of this Agreement. The Client undertakes to keep the Company indemnified against any direct or indirect, actual or contingent loss resulting from his failure to notify the Company of such termination Authority.

Initials:

A relevant Written Resolution and / or board minutes of the Board of Directors (BoD) should be attached designating the Authorised Representative to manage Client's account and act on its behalf.

	Full name	Identification Card / Passport Number
1		
2*		

*If more than two persons please attach a list.

If a beneficial owner holds or have held, over the last 12 months a significant public function (i.e.: minister, member of Parliament, Member of the Board of a Regulator Authority) or you are a close associate of such person, mark this field.



If you have marked the above field, it is necessary to complete the document on **Politically Exposed Persons**.

Has a bankruptcy order or any other order ever been issued or is one pending against you regarding financial obligations? YES NO

Has the Client ever been engaged in a dispute with an Investment Firm or with a Company whose securities are listed or has the Client ever been sanctioned by a regulatory authority in Cyprus or abroad (i.e Securities & Exchange Commission, Central Bank) (if yes please provide details on a separate sheet) YES NO

C. INVESTOR QUESTIONNAIRE

Completion of this document (appropriateness) is required for us to determine your risk profile and ensure that the investment services and / or financial instruments requested are appropriate for you. To enable us to act in your best interests, please complete the below information so that we can assess whether you have the necessary knowledge and experience to understand and bear the associated financial risks. Please let us know if any of the information provided changes at any time.

Appropriateness Test:

Clients opting for execution only services need to complete the Appropriateness test, as the Company must only assess whether the financial instrument or service is appropriate for the client. The Company needs to ask retail clients for information regarding their knowledge and experience if they want to trade in complex financial instruments. Note that as per Art 54 (13) or Reg 2017/565 the appropriateness test should be done each time you will invest in a new class of financial instruments, for which you have not been previously assessed.

C1. FINANCIAL PROFILE	ANSWER	FOR PROCHOICE USE ONLY
1. What is your total regular net annual income		
Less €200.000		
€200.000 - €1.000.000		
€1.000.000 - €3.000.000		
Over €3.000.000		
2. What is approximately the Client's Net Asset Value (Assets minus Liabilities)		
Less €500.000		
€500.000 – €2.000.000		
€2.000.000 - €5.000.000		
Over €5.000.000		
3. Sources of investment portfolio (select most applicable)		
Capital and reserves		
% of regular income		
Borrowed funds		

Initials:

4. What is the current composition of your investment portfolio		
% Cash		
% Real Estate Property		
% Equities / Bonds/ Fixed income		
% Other		
5. How many persons are employed by the Client:		
0 – 7		
8 -14		
15-50		
More than 50		
C2. KNOWLEDGE AND EXPERIENCE	ANSWER	FOR PROCHOICE USE ONLY
6. What type of financial and other investment instruments you are familiar with / you have invested in (select all that apply)		
Cash Deposits and Government Bonds		
Money market funds		
Capital Guarantee Products		
Real Estate Property		
Listed Corporate Bonds, Bond Funds and other fixed income securities		
Listed Equities and Equity Funds		
Mutual funds of Shares		
Foreign Currency		
Derivatives (Options , Futures etc)		
Commodities / Physical Gold and other Precious Metal		
Cryptocurrencies		
7. In what markets have you already invested (select all that apply)		
None, we have not previously done any investments		
Home country		
Developed markets (e.g U.S.A and Western Europe)		
Energy markets		
8. By which method have you already invested (select all that apply)		
Execution only, we decide on our own where to invest		
Based on investment advice		
Discretionary / Asset Management		
9. What is the value of your current investment portfolio		
Less than €30.000		
€30.000 - €60.000		
€60.000 - €100.000		
Over €100.000		

Initials:

10. Overall, how would you assess your investment knowledge and experience		
Extremely limited - Little or no experience		
Limited – I understand the basic investment principles		
Average – I understand the main investment principles		
Good – I understand most investment principles		
Very good – I am an investment professional / frequent trader		
11. What is the average value of your transactions		
Less than €20.000		
€20.000 - €80.000		
€80.000 - €200.000		
€200.000 - €1.000.000		
Over €1.000.000		
12. How many financial transactions have you done yearly on average in each of the last 5 years		
None		
Less than 10		
11-50		
51-100		
Over 100		
13. How many of these were performed in the last year		
More than 3 transactions + 2		Plus 2
C3. INVESTMENT PROFILE	ANSWER	FOR PROCHOICE USE ONLY
1. What is the desired period of your investments (select all that apply)		
Very short Term → 0 -1 Year		
Short Term → 1 -3 years		
Medium Term → 3 -5 years		
Long Term → > 5 years		
2. What is your expected yearly return for your investments		
Low → 3% - 5%		
Average → 5% - 8%		
Above average → 8% - 12%		
High → >12%		
3. Which of the following risk profiles corresponds better to your investment objectives		
Preservation of capital: no exposure to market risk		
Secure investment : low exposure to market risk		
Medium term growth : moderate to exposure to market risk		
Performance objective: substantial exposure to market risk		
Speculation: high exposure to market risk		

Initials:

4. When do you plan to withdraw principal (initial capital invested) from your investment portfolio		
In less than 1 year		
Within 1 -3 years		
Within 3 -5 years		
After > 5 years		
Currently I/we do not plan to withdrawn principal		
5. What is the desired level of liquidity of your investment portfolio		
Fully liquid – all investments can be easily converted to cash		
Mainly liquid – a large percentage of the investment cab be easily converted to cash		
Somewhat liquid – the investments are split between easily convertible to cash and not easily convertible to cash		
Somewhat liquid – a large percentage of the investments may not be easily convertible to cash		
Illiquid – Most of the investments may not be easily convertible to cash or there is a penalty for doing so		
Indifferent for liquidity – investments may vary and can be a mixture		
6. If you plan to withdraw principal from your investment portfolio, what portion do you anticipate withdrawing annually		
Currently I/we do not plan to withdraw principal		
Less than 10%		
Between 11% - 25%		
Between 26% -50%		
Between 51% -75%		
Between 76% - 100%		
7. What is the desired level of liquidity of your investment portfolio		
Capital preservation		
Produce regular income		
Produce occasional income		
Produce a combination of income and capital growth		
Growth of capital with little or no income		
8. Would you consider any level of gearing / margin for your portfolio		
None		
< 25%		
25% -50%		
51% -75%		
Maximum % that can be obtained		

Initials:

9. What would you consider to be your overall risk level profile		
Not willing to take any investment risk which may result in any loss of initial capital even in adverse market conditions.		
Willing to undertake minor investment risk so that to aim mainly for capital preservation. In adverse market conditions minor losses may occur with only minimal percentage of the initial capital been unrecoverable.		
Willing to undertake some investment risk and small market volatility in order to achieve average returns. In adverse market conditions moderate losses may occur and a small percentage of the initial capital may be unrecoverable		
Willing to undertake a considerable risk and accept market volatility in order to enhance potential returns. In adverse market conditions, negative returns and possibly unrecoverable loss of a certain percentage of the initial investment capital may occur		
Willing to undertake a large degree of investment risk in order to achieve high potential returns. In adverse market conditions a substantial and possibly unrecoverable loss of a large percentage of the initial investment capital may		
<i>Please state any investments you would consider inappropriate to invest in, any legal, moral, ethical or tax-related constraints, or any other investment concerns, limitations or conflicts you would like to address and other material information you would like to provide (continue in an additional separate sheet if required)</i>		

Initials:

Client Authorization and Signature

I/WE AS THE LEGAL REPRESENTATIVE(S) OF THE ABOVE COMPANY/LEGAL ENTITY HEREBY REQUEST TO OPEN AN ACCOUNT WITH ONE PLUS CAPITAL LIMITED (HEREINAFTER "ONEPLUS"), IN THE NAME OF THE ABOVE-MENTIONED COMPANY/LEGAL ENTITY. THE INFORMATION DISCLOSED ABOVE IS TRUE AND ACCURATE AND WE ATTACH THE REQUIRED DOCUMENTS, WHICH ARE TRUE COPIES OF THE ORIGINALS. WE WILL PROMPTLY NOTIFY YOU IN WRITING IF ANY OF THE ABOVE PARTICULARS CHANGE OR CEASE TO BE TRUE AND ACCURATE. I/WE ALSO UNDERTAKE TO SUPPLY ANY OTHER INFORMATION THAT MAY BE REQUIRED IN THE FUTURE AND I/WE HEREBY SUBMIT TRUE COPIES OF THE RELEVANT ORIGINAL DOCUMENTS.

AUTHORIZED SIGNATORY(IES):

Full name / I.D./Passport Number	Signature	Date
Name:	-----	-----
I.D./Passport Number:		
Name:	-----	-----
I.D./ Passport Number:		

Company's seal**PROCHOICE CHRIMATISTIRIAKI LTD USE ONLY**

 Received by : _____
Name
Signature
Date

 Checked by : _____
Name
Signature
Date

Comments : _____

Initials:

D. MIFID CLIENT CATEGORISATION AND INVESTMENT PROFILE

The Client's Categorization, and consequently, its level of protection-such as whether the Client shall be entitled to the payment of compensation from the Investor Compensation Fund, will be determined pursuant to the answers and information to be provided in this Part.

The categorization criteria laid down by the relevant legislation are the following:

- i. **'Retail Client'** is a client that is neither a professional client nor an eligible counter party.
- ii. **'Professional Client'** is a client who possesses the experience, knowledge and expertise to make its own investment decisions and properly assess the risks that it incurs. Some legal entities are deemed to be Professional Clients; please state whether any of the following apply to the Client's case (SELECT ALL APPLICABLE).
- iii. **'Eligible Counterparties'** are any of the following entities to which a credit institution of IF provides the services of reception and transmission of orders on behalf of clients and/or execution of such orders and/or management of investments and/or dealing on own account: Cyprus Investment firms (IF), other regulated Ifs, credit institutions, insurance companies, UCITS and their management companies, pension funds and their management companies and other financial institution authorised by a Member State or regulated under the laws of Cyprus or under European Union Law, national governments and their corresponding offices, including bodies, Central Banks and supranational institutions. In essence Eligible Counterparties are Professional Clients or specified types who receive lower degree of protection in respect of the transaction with the IF or in respect of the ancillary service directly relating to the transaction in the course of execution of orders on behalf of clients and/or dealing on own account and/or receiving and transmitting orders and ancillary services related to any of these investment services. For any other investment or ancillary service these clients are not treated as Eligible Counterparties

PLEASE STATE IF ANY OF THE BELOW APPLIES TO THE COMPANY /LEGAL ENTITY (TICK ALL THAT APPLY)

- Entity that holds a requisite regulatory licence or is subject to supervision in order to operate in the financial sector such as:
- | | |
|--|---|
| (a) <input type="checkbox"/> Bank of other Credit Institutions | (b) <input type="checkbox"/> Other authorised or regulated financial institutions |
| (c) <input type="checkbox"/> Investments Firms | (d) <input type="checkbox"/> Pension funds and management companies of such funds |
| (e) <input type="checkbox"/> Insurance Undertakings | (f) <input type="checkbox"/> Other institutional Investors |
| (g) <input type="checkbox"/> Local firms | |
- Institutional investor whose main activity is to invest in financial instruments, including entity dedicated to the securitization of assets or other financing transactions.
- National and regional government including public body that manage public debt at national or regional level, Central Bank, International and supranational institution such as the World Bank, the International Monetary Fund, the European Central Bank, the European Investment Bank and other similar international organisation.
- Large firm or other undertaking that fulfils at least two of the following three criteria:
- a) Balance sheet total at least €20.000.000 (or equivalent amount in foreign currency)
 - b) Net turnover at least €40.000.000 (or equivalent amount in foreign currency)
 - c) Own funds at least €2.000.000 (or equivalent amount in foreign currency)

Initials:

CLIENT CATEGORISATION AND INVESTMENT PROFILE

➔ **In accordance with the information provided by the Client and the provisions of the relevant legislation, the Client is CATEGORISED as a:**

RETAIL CLIENT
PROFESSIONAL CLIENT
ELIGIBLE COUNTERPARTY
CHECKED BY:
 (Prochoice Officer)

FULL NAME

SIGNATURE

DATE
Request for a different client treatment (As a professional client or Non-Professional):

A Retail Client has the right to request to be treated as a Professional Client by PROCHOICE, but shall receive a lower level of protection. PROCHOICE is not obliged to offer services to the Client on this basis.

In case you have been categorized as a RETAIL CLIENT:

- i. but wish to be treated as a Professional Client, or
- ii. the circumstances applying in the Client's case may change in the future and on the basis of the new set of facts, the Client wish to be treated as a Professional Client, the Client must notify Prochoice in writing on its request to be treated as a Professional Client.

In accordance with the Law, in order to allow clients to waive part of their protection and be treated as Professional Clients, an appropriate assessment must take place. In this assessment, the Client should satisfy as least two of the following three criteria:

- i. to possess significant financial knowledge and expertise or to possess or to have possesses an executive position in a regulated investment firm or bank; (Please note that in that case of legal entities, the person subject to this assessment is the person authorised to carry out transactions on behalf of the entity)
- ii. to have carried out transactions of significant size on the same financial instruments at an average frequency of ten (10) transactions per quarter over the previous four quarter;
- iii. to possess a financial instrument portfolio including cash deposits and financial instruments of at least €500.000

A Professional Client has the right to request not to be treated as a Professional client in order to be afforded a higher level protection. Prochoice shall not be obliged to offer services to the Client on this basis. In case the Client has been categorised as a Professional Client but wishes not to be treated as a non Professional Client, you may communicate your request by making with X the field below:

The Client hereby requests that the rules of professional conduct that govern the relationship of investment Firms and **Retail Clients** be applied to his case. The Client declares that he understands the consequences of not being treated as a Professional Client by Prochoice.

It is noted that, in accordance with the Law, the highest level of protection shall be offered of the Client which is deemed to be a professional client, enters into a written, separate agreement with Prochoice to the effect that it shall not be treated as a Professional client for the purposes of the applicable conduct of business rules.

Initials:

E. IDENTIFICATION OF ACCOUNT HOLDER
Please complete Section I- General Information, Section II FATCA and CRS

Account Holders who are U.S. Tax residents under the provisions of the U.S. Law, must indicate in this form that they are U.S. Tax residents and must complete in addition to this form the IRS W8BEN-E or W-9 form.

If the Account Holder is a Passive Non -Financial Entity ('NFE') or an Investment Entity located in a Non-Participating Jurisdiction managed by another Financial Institution, please provide information on the natural persons(s) who exercise control over the Account Holder by completing 'Section II- Controlling Person self-certification form' for each Controlling Person.

SECTION I. GENERAL INFORMATION

In general, the contracting party of a Business Relationship for the provision of investment services/ activities is treated as the Account Holder for the purposes of CRS. However, there are exceptions regarding certain intermediaries as well as concerning trusts.

Name of Legal Entity _____

Entity Registration Number _____

Jurisdiction _____

Registered Address _____

Main place of business address (if different) _____

SECTION II. A. FATCA STATUS

1. Is your company a Financial Institution?

YES NO

If you answer YES, please provide your GIIN (Global Intermediary Identification Number):

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2. Is your company a US Entity?

YES NO

If you answer Yes, please complete form **W9**

If you answer No, please complete form **W-8BEN-E**

3. Does your company have Controlling Persons that are US Persons?

YES (If YES please answer YES in one of the following options) NO

a. Is your company an **Active** NFFE? YES NO

b. Is your company a **Passive** NFFE? YES NO

Initials :

SECTION II. A. CRS – Common Reporting Standard Compliance

 Please complete our **CRS -SELF CERTIFICATION FORM**

	Country / Jurisdiction of Tax Residence	TIN	If no TIN available enter Reason A,B or C
1			
2			
3			

Reason A: The country / jurisdiction where the Account Holder is a resident does not issue TINs to its residents.

Reason B: The Account Holder is otherwise unable to obtain a TIN or equivalent number.

Reason C: No TIN is required (only select this reason if the authorities of the country of tax residence enter below do not require a TIN to be disclosed). Please select this reason only in case the domestic law the relevant jurisdiction does not require the collection of the TIN issued by such country/jurisdiction.

DECLARATION AND SIGNATURE

I/We understand(s) that the information provided by me/us, is governed by the full provisions of the terms and conditions governing my/our Business Relationship with the company, setting out how the Company may use and share information provided by me/us.

I/We further acknowledge and understand that the information contained in this form may reported to the tax authorities of the country/jurisdictions in my/our account(s) is/are maintained and exchanged with tax authorities of other country/jurisdictions in which I/we may be tax resident pursuant to intergovernmental agreements to exchange financial account information.

I/We certify that I am authorised to sign as the Account Holder in respect of all the account(s) to which this form relates.

I/We provide all required client identification documentation, and they are genuine and legitimate or Certified Copies, and their content is true and correct.

I/We undertakes to notify Prochoice in writing immediately in case of changes that may affect either the details it has provided in relation to the Agreement and/or the Questionnaire or any rating it has received in the context of the Agreement and/or the Questionnaire.

I/We undertakes to advise Prochoice, within 30 days of any change in circumstances which affects my/our tax residency status identified above or causes the information contained herein to become incorrect or incomplete including any change to the information on controlling persons and o provide the Prochoice with a suitable up-dated self-certification and Declaration within 30 days of such change in circumstances.

Client Signature

F. BASIC INFORMATION**I. ORDER EXECUTION POLICY**

It is confirmed that the Client has carefully considered and understood the content of the Order Execution Policy of Prochoice (the 'Policy'). The client accepts the terms described in the aforementioned Policy and accepts that this Policy shall be applied by Prochoice in the execution of its orders for the effecting of transactions in Financial Instruments.

Please note that Prochoice may not be able to execute yours orders if you do not agree with the above policy.

II. ACCEPTANCE OF POLICIES AND OTHER DOCUMENTS AND TERMS

It is confirmed that the Client has received, carefully considered and understood the content of the documents listed below. The client accepts the terms described in these documents and accepts that the Policies described therein shall be applied by Prochoice in relation to the provision of the Services.

1. Terms & Conditions
2. Best Order Execution Policy
3. Conflicts of Interest Policy
4. Client Categorization Policy
5. Complaints Handling Policy & Form
6. Privacy Policy & General Data Protection Notice
7. MiFID II information document succinctly stating the Policies of Prochoice I relation to the provision of investment services and related matters.

These documents are posted on Prochoice's website, and the Client accepts that they may be amended from time to time and that Prochoice shall inform the Client on every amendment either through direct communication or through posting the amended document on its website.

G. IMPORTANT NOTES

"Beneficial Owner" in accordance with the Law for Combating Money Laundering, means any natural person who ultimately owns or controls the customer and/or the natural person on whose behalf a transaction or activity is being conducted and includes at least:

(a) In the case of corporate entities:

- i. natural person who ultimately owns or controls a corporate entity through direct or indirect ownership of a sufficient percentage of the shares or voting rights or ownership interest in that corporate entity, including through bearer shareholdings, or through control via other means, other than a company listed on a regulated market that is subject to disclosure requirements consistent with European Union law or subject to equivalent international standards which ensure adequate transparency of ownership information.

Provided that –

- a. an indication of direct shareholding shall be a shareholding of 25% plus one share or an ownership interest of more than 25% in the customer held by a natural person; and
- b. an indication of indirect ownership shall be a shareholding of 25% plus one share or an ownership interest of more than 25% in the customer held by a corporate entity, which is under the control of a natural person, or by multiple corporate entities, which are under the control of the same natural person or persons. Provided further that the control by other means can be verified, inter alia, based on the criteria provided for in section 142 (1) (b) and section 148 of the Companies Law;

Initials :

(b) in the case of corporate entities:

(c) in the case of trust:

- i. the settlor.
- ii. the trustee or commissioner.
- iii. the protector, if any.
- iv. the beneficiary, or where the individual benefiting from the legal arrangement or legal entity have yet to be determined, the class of persons in whose main interest the legal arrangement or entity is set up or operates.
- v. any other natural person exercising ultimate control over the trust by means of direct or indirect ownership or by other means; and

(d) in the case of legal entities, such as foundations, and legal arrangements similar to trust, the natural person holding equivalent or similar positions to the person referred to in paragraph (b);

"Ultimate Control": Pursuant to Directive DI144-2007-08 of the Cyprus Securities and Exchange Commission, except for the aforesaid procedures for the verification of the identity of the beneficial owners, a CIF must identify the persons who have ultimate control over the legal person's business and assets. In the cases that the ultimate control rests with the persons which have the power to manage the funds, accounts or investments of the legal entity, without requiring authorization and who would be in position to override the internal procedures of the legal person, the CIF verifies the identity of the natural persons who exercise ultimate control as described above even if those persons have no direct or indirect interest or an interest of less than 25% plus 1 share in the legal person's ordinary share capital or voting rights. The required evidence of identity must be acquired for the persons mentioned above.

- If more than one questionnaire has been completed and signed with regard to the same service, the one with the most recent date shall be considered to be the valid one as of the date it is signed.
- If the Client fails to provide all the required information, this may affect Argus's ability to act in its best interests and precludes the provision of investment advice to the Client. If the Client has not provided all the required information regarding himself, due to the risks and the characteristics of the intended transactions, the Client hereby confirms to Argus that although it is not providing all required information and despite the inherent risks, it wishes to proceed with the execution of transactions.
- The personal data of natural persons mentioned in Appendix 1, shall be kept and processed pursuant to the provisions of the relevant legislation.
- The Client is obliged to notify Argus in writing immediately after there has been a change in its contact details and other information provided to Argus for the purpose of the provision of the Services and the Facilities.
- In order for a trading account to be activated, all documents required by the relevant stock exchange or market or other service providers that may be related to the provision of services by Prochoice, must be fully completed and submitted.

Initials :

Client's Declaration

The Client Declares and unreservedly accepts the following:

- i. I have carefully read the content of this Questionnaire and I have provided the relevant information regarding myself and I hereby declare and warrant that these are true and correct**
- ii. I have attached all required client identification documentation, and these are genuine and legitimate or Certified Copies and their content is true and correct**
- iii. Prochoice shall have no liability in case I have omitted to provide any relevant or essential information required.**
- iv. The Client undertakes to notify Prochoice in writing immediately in case of changes that may affect either the details it has provided in relation to the Agreement and / or the Questionnaire, or any rating I have received in the context of the Agreement and /or the Questionnaire.**

SIGNATORIES	Signature and Company Seal	Date
1. Full name: _____ I.D Card/Passport number or Company's Reg.no _____ Capacity of the Signatory: _____ For and behalf of Legal Entity: _____	_____ _____	_____ _____
2. Full name: _____ I.D Card/Passport number or Company's Reg.no: _____ Capacity of the Signatory: _____ For and behalf of Legal Entity: _____	_____ _____	_____ _____

For and behalf of PROCHOICE

Signature: _____

Position: _____

Name: _____

Date : _____

WITNESSES

Full Name: -----

ID/Passport No:

Signature: -----

Initials :

FOR PROCHOICE USE ONLY – CLIENT IDENTITY VERIFICATION

I. CLIENT'S IDENTIFICATION DOCUMENTATION ATTACHED

Required Documents for Legal Entities

For the purposes of identifying and verifying the identity of the legal entity, it is important to provide us with the below documents:

- Memorandum and Articles of Shareholders
- Certificate of Incorporation
- Certificate of Registered Address
- Certificate of good standing
- Certificate of Shareholders
- Certificate of directors and secretary
- I.D./Passport for all Directors and Secretary (if Director is a legal person, please provide all legal documents up to the physical person, if Secretary is a legal person, please provide Certificate of Directors and Secretary)
- Utility bills (within 3 months) for all Directors and Secretary
- I.D./Passport for all Shareholders with direct/indirect ownership >20% (if any of the shareholders is a legal person, please provide Certificate of Directors and Secretary up to the physical person) and ultimate beneficial owners of the company
- Audited Financial Statements of the last 2 years. If not available copies of the latest management accounts.
- Written resolution or resolution of Board of Directors authorising the opening of the account and granting authority to those who will operate it Including authorised signatories)
- Documents and data to establish the identity of person/s authorised by the legal person to operate account, as well as the registered shareholders and beneficial owners of the legal person.
- Ownership structure

Certificate of Directors and Secretary

Original (within the last month) issued by the Registrar of Companies. If the certificate is not recent or original a lawyer's and secretary's letter is required to verify that the certificate is still valid.

All legal entities should have a LEI code (Legal Entity Identification) in order to be able to trade.

II. CLIENT CATEGORISATION BASED ON THE ASSESMENT OF RISK IN RELATION TO THE PREVENTION OF THE CONCEALMENT OF PROCEEDS OF CRIME

As a result of the information provided and the operation of the provisions of the applicable legislation, the Client is categorized as a:

- High Risk** client and enhanced due diligence measures have had to be taken for the Client
- Low Risk** client and simplified due diligence measures were applied for the Client
- Normal Risk** client

Initials :

APPENDIX A **SERVICES PROVIDED**

The Services which shall be provided by Prochoice to the Client are the following:

Investment services

- Reception and transmission of orders in relation to one or more financial instruments.
- Execution of orders on behalf of clients

Ancillary services

- Safekeeping and administration of financial instruments for the account of clients, including custodianship and related services such as cash/collateral management.
- Granting credits or loans to an investor to allow him to carry out a transaction in one or more financial instruments, where the firm granting the credit or loan is involved in the transaction
- Foreign exchange services where these are connected to the provision of investment services.
- Investment research and financial analysis or other forms of general recommendation relating to transactions in financial instruments.
- Services related to underwriting

The Financial Instruments for which the above Services shall be provided are:

- Transferable securities
- Money market instruments
- Units in collective investment undertakings.
- Options, futures, swaps, forward rate agreements and any other derivative contracts relating to securities, currencies, interest rates or yields, or other Law 144(I)/2007 The present English text is for information purposes only and is not legally binding. The legally binding document is in the Greek language. derivatives instruments, financial indices or financial measures which may be settled physically or in cash.
- Options, futures, swaps, forward rate agreements and any other derivative contracts relating to commodities that must be settled in cash or may be settled in cash at the option of one of the parties (otherwise than by reason of a default or other termination event).
- Options, futures, swaps, and any other derivative contract relating to commodities that can be physically settled provided that they are traded on a regulated market or/and an MTF
- Options, futures, swaps, forwards and any other derivative contracts relating to commodities, that can be physically settled not otherwise mentioned in paragraph 6 of Part III and not being for commercial purposes, which have the characteristics of other derivative financial instruments, having regard to whether, inter alia, they are cleared and settled through recognized clearing houses or are subject to regular margin calls.
- Derivative instruments for the transfer of credit risk.
- Financial contracts for differences
- Options, futures, swaps, forward rate agreements and any other derivative contracts relating to climatic variables, freight rates, emission allowances or inflation rates or other official economic statistics that must be settled in cash or may be settled in cash at the option of one of the parties (otherwise than by reason of a default or other termination event), as well as any other derivative contract relating to assets, rights, obligations, indices and measures not otherwise mentioned in this Part, which have the characteristics of other derivative financial instruments, having regard to whether, inter alia, they are traded on a regulated market or an MTF, are cleared and settled through recognized clearing houses or are subject to regular margin calls

APPENDIX B**ROLE OF PROCHOICE WITH RESPECT TO CORPORATE ACTIONS
RELATING TO CLIENT FINANCIAL INSTRUMENTS**

Specify whether Prochoice may instruct the exercise of voting rights or other corporate actions:

- | | |
|---|----------|
| 1. At its discretion | YES / NO |
| 2. Only with agreement or on instructions of Client | YES / NO |

Prochoice shall not be entitled to procure any corporate action including the exercise of any voting rights attaching to the Portfolio's holding of a collective investment undertaking operated, managed or advised by the IF except with the agreement or on the specific instructions of the Client but shall be entitled to count such holdings for the purposes of constituting a quorum at a meeting of such collective investment undertaking operated, managed or advised by the Prochoice.

APPENDIX C
CONSENT TO SECURITIES FINANCING TRANSACTIONS
INVOLVING SECURITIES OF CLIENT

Please indicate X depending on your choice:

..... I/We hereby expressly consent to the IF entering into arrangements for Securities Financing Transactions in respect of Financial Instruments held by the IF on my behalf, or otherwise use any Financial Instruments for its own account or the account of any other person or client of the IF.

..... I/We do not consent to the IF entering into arrangements for Securities Financing Transactions in respect of Financial Instruments held by the IF on my/our behalf, or otherwise use any Financial Instruments for its own account or the account of any other person or client of the IF.

..... I/We hereby expressly consent to the IF entering into arrangements for Securities Financing Transactions in respect of Financial Instruments held on behalf of me/us in an **omnibus account** maintained by a third party or otherwise use any Financial Instruments held in such an account for its own account or the account of any other person.

..... I/We do not consent to the IF entering into arrangements for Securities Financing Transactions in respect of Financial Instruments held on behalf of me/us in an **omnibus account** maintained by a third party or otherwise use any Financial Instruments held in such an account for its own account or the account of any other person.

APPENDIX D

FEES, COMMISSION AND OTHER EXPENSES

Commission (%) :

1. Commissions

Service	Commission scale
Prochoice online and Reception & Transmission of orders in relation to one or more financial instruments	0.1 % - 1.50%
Safekeeping and administration of financial instruments, including custodianship and related services (annually cost)	€30
*In some cases, Prochoice may agree a specific commission with the client.	

It needs to be noted that a minimum commission of €2.00 is applied per stock transaction in the CSE /ASE.

2. Transaction Fees and Depository Fees

Stock Exchange / CSE &ASE	Shares	Corporate Bonds	Government Bonds
CSE (Main Market)	0.0325%	N/A	N/A
CSE (Other Market)	0.08%	0.01%	0.01%
ASE	0.0325%	0.01%	0.01%

In addition, the following fees are charged:

- A fixed fee of €0.16 for CSE and €0.06 for ASE is charged per trade
- €0.50 for all transactions of a client on a financial instrument, per transaction type (purchase or sale) per day on CSE and ASE

3. SALES TAX

The Sales tax for transactions defined by the Ministry of Finance of the Greek Ministry of Economy and Finance is currently set at 0.1%. Sales tax is applicable on the sale of any financial instrument with the exception of "Rights" on which no tax is charged in ASE.

4. Other charges

Description	Fees Amount	
Account opening		
Creation od Share account CSE	€10	
Creation od Share account ASE	€10	
	Cyprus Company	Foreign Company
Brokerage Account opening Fees	€20	€20
Deposit of POA Form	€5	€5
Deposit legal documents of legal entities.	€15	€25
	CSE	ASE
Request of CSE Statement	€4	Min €5+€2
Transfer of shares from the CSD	€5.00 /share title (maximum amount €20)	
Change of Details in CSE	€3.00	
LEI issuance only for Legal Entities	€100.00	

We are at your disposal for any clarification at Tel : +35724661192

Initials:

APPENDIX E

GENERAL INFORMATION PROVIDED TO THE CLIENT

- (1) Prochoice Chrimatistiriaki Ltd **contact details:** Ariadnis 21, Patsias Court 25, 2nd Floor, Office 202 7060 Livadia, Larnaca , Cyprus. Tel: +35724661192, Fax: +35724662464, email: backoffice@pro-choice.com.cy
- (2) Communication languages: Greek / English
- (3) The PROCHOICE may accept telephone, written facsimile and email orders to execute orders. The IF informs the client upon his/her order to execute his/her order either by sending a message to the mobile when the order is executed or by email at the end of each trading session. Moreover, a statement of account including all the executed transactions and a detailed account statement on the number and type of Financial Instruments owned by each Client shall be sent on annual basis
- (4) The PROCHOICE is authorised by the Cyprus Securities and Exchange Commission whose contract address is 27 Diagorou Str. CY-1097 Nicosia
- (5) The PROCHOICE does not provide the investment service of portfolio management to the Client

DATA SUBJECT CONSENT FORM/

I,, with
ID/Passport/Registration Numberhereby
consent that Prochoice Chrimatistiriaki Ltd can process my personal data for the purpose
of Brokerage transactions, opening of Brokerage accounts and Bank transfers .

I am aware that I may revoke my consent at any time, by using the “DATA SUBJECT
CONSENT WITHDRAWAL FORM”, either by sending it via email at [backoffice@pro-
choice.com.cy](mailto:backoffice@pro-choice.com.cy), or by post at Ariadnis 21, Patsias Court 25, 2nd Floor, Office 202 7060 Livadia,
Larnaca , Cyprus.

Signed by : _____

Date : _____

Initials:

**To: PROCHOICE CHRIMATISTIRIAKI LTD hereinafter called (“PROCHOICE”)
Ariadnis 21, Patsias Court 25, 2nd Floor, Office 202, 7060 Livadia Larnaca, Cyprus**

Dear Sirs,

1. With reference to all of the investment and ancillary services to be provided to me/us by PROCHOICE and all transactions between PROCHOICE and myself/ourselves, I/we hereby authorise and request PROCHOICE to rely upon and act in accordance with any instructions, notices, demands and or other communications which from time to time be or purport to be given by telephone, fax, telefax, telegraph, email, cablegram or any other method of electronic communication received by PROCHOICE without inquiry on the PROCHOICE's part as to the authority or identity of the person making or purporting to make such instruction, notices, demands and or other communications and regardless of the circumstances prevailing at the time of such instruction, notices, demands and or other communications. PROCHOICE shall be entitled to treat such instructions, notices, demands and or other communications as fully authorised by, and binding upon me/us and the PROCHOICE shall be entitled (but not bound) to take such steps in connection with, or in reliance upon, such communication as PROCHOICE may in good faith consider appropriate, whether such communication includes instructions to execute a transaction or to effect the transmission of my/our order or to pay money, or otherwise to debit or credit any account, or relates to the disposition of any money, securities or documents, or purports to bind me/us to any agreement or other arrangement with PROCHOICE or with any other person or to commit me/us to any other type of transaction whatsoever, regardless of the nature of the transaction or arrangement or the amount of money or value involved and notwithstanding any error or misunderstanding or lack of clarity in the terms of such instructions, notices, demands and or other communications.
2. In consideration of PROCHOICE agreeing to rely upon and act on such instructions, notices, demands and or other communications as aforesaid, I/we hereby assume all responsibility and I/we agree and undertake to hold PROCHOICE harmless from all and any losses, claims, actions, proceedings, demands, damages, costs or expenses or indebtedness and liability which PROCHOICE may incur or sustain of whatever nature and in any manner howsoever arising by reason of acting upon my/our instructions, notices, demands and or other communication as aforesaid.
3. This authorisation and indemnity shall remain in full force and effect unless and until revoked by me/us by written notice to PROCHOICE, provided PROCHOICE has reasonable time to act upon the notice of the revocation, and provided that any such notice shall not affect my/our nor release me from any responsibility, liability and indemnity provided to PROCHOICE under paragraph 2 hereinabove in respect of any transactions and or other act performed by PROCHOICE, which were initiated prior to such notification.
4. I/We hereby undertake to indemnify PROCHOICE, and keep PROCHOICE harmless from any claim, legal action, damages, loss, encumbrances and costs that any third person may suffer, incur or sustain of whatever nature and howsoever arising by reason of PROCHOICE acting on my/our instructions, notices, demands and or other communication as aforesaid.
5. I/We hereby further undertake to acknowledge any and all charges on my/our accounts and any amount effected by me/us as a result of my/our instructions, notices, demands and or other communication.
6. I/We hereby further waive all and any rights to dispute any actions of PROCHOICE undertaken pursuant to my/our instructions, notices, demands and or other communications and all and any rights to claim or demand any compensation for any loss and/or damage and/or costs that I/we may suffer and/or incur or sustain as a result of PROCHOICE acting on my/our instructions, notices, demands and or other communication.

Initials:

7. I/We hereby undertake that where any instructions, notices, demands and or other communications, originally sent by telephone, fax, telefax, telegraph, email, cablegram or any other method of electronic communication will subsequently be communicated to PROCHOICE again in person or by postal mail, by any telecommunication and or other electronic communication or in any other manner whatsoever, such instructions, notices, demands and or other communications shall be clearly marked **“Instructions already sent to you before by fax or email – Please avoid duplication”**. I/we further undertake that where the said subsequent instructions, notices, demands and or other communications is/are communicated to PROCHOICE in person, I/we shall clearly state that I/we have already sent to PROCHOICE the said instructions, notices, demands and or other communications and that I/we request PROCHOICE to avoid duplication. Failure in my/our part to do so, releases PROCHOICE from any liability whatsoever for acting more than once on the same instructions.

Yours Faithfully,

CLIENT / CLIENT’S AUTHORISED SIGNATORIES		
NAME AND I.D. / PASSPORT NUMBER	SIGNATURE	DATE
1. Name: I.D. / Passport Number:
2. Name: I.D. / Passport Number:
WITNESSES	SIGNATURE	DATE
1. Name: I.D. / Passport Number:
2. Name: I.D. / Passport Number:

.....(hereinafter the 'Company')

WRITTEN RESOLUTION OF THE BOARD OF DIRECTORS OF THE COMPANY PASSED AND SIGNED IN ACCORDANCE WITH THE COMPANY'S ARTICLES OF ASSOCIATION, DATED : /..... /.....

DIRECTORS: 1. _____ 3. _____
2. _____ 4. _____

SECRETARY: _____

IT WAS RESOLVED AS FOLLOWS:

1. That the company “ PROCHOICE CHRIMATISTIRIAKI LTD “ (hereinafter the “IF”) be appointed as broker, investment advisor, custodian/person with the task of safe keeping and administration of financial instruments and investment/portfolio manager of the Company and generally as provider of investment and ancillary services (as defined in Law 87(I)/2017) to the Company.
2. That the Agreement for the provision of and the addendum (hereinafter the “Services”), which has/have been presented before the Board of Directors, be approved and the Company hereby authorizes the IF to accept the signature of such of the persons whose details and specimen signatures are specified in Table 1 below (hereinafter the Signatories) to sign on behalf of the Company the said Agreement, all the documents which accompany this Agreement and any addendum to such Agreement, any other agreements required to effect paragraph 1 and to specify and appoint any additional signatories.
3. That an investment portfolio account or accounts, be opened as may be required from time to time, in the name of the Company with the IF in accordance with the standard terms of the IF and that the following resolutions shall apply to all accounts with the IF.
4. That the Company hereby authorizes the IF to accept the signature of the Signatories generally for the Company in all matters relating to any account, whether such account is in credit or debit and to accept the Signatories as fully empowered to act on behalf of the Company in any other transactions with the IF, including the arrangement of temporary advances by way of short term loan/overdraft, the withdrawal, delivery, disposal of or dealing with any property, documents, or securities held with the IF and any indemnities in favor of the IF, investments, redemptions, additions of cash and investments, withdrawal of cash and investments and any instructions whatsoever in relation to the investment portfolio accounts and or in relation to the Agreement for the provision of the Services to an investor.
5. That the Company hereby authorizes the IF to accept the signature of the Signatories generally for the Company to arrange with the IF from time to time for advances to the company by way of loan and or any other credit facilities whatsoever and to mortgage or charge all or any of the assets of the company and to sign on behalf of the company any documents from time to time required by the IF relating to or for securing any advances to the company or any liabilities of the company to the IF.
6. That the Company hereby authorizes the IF to accept the signature of the Signatories for the investment/portfolio management, brokerage and custodian services Agreements and or addendums to such Agreement between the IF and the Company and any other agreement or documents that may be required to be signed in the future in the context of the provision of the Services to the Company by the IF.
7. That the IF be authorized (a) to receive all interest, dividends and other payments or distributions in respect of the Securities, (b) to surrender Securities against receipt of the moneys payable at maturity or on redemption and where the Company requests The IF to do so, (c) where moneys are payable in respect of Securities in more than one currency to collect them in such currency as The IF may at its discretion determine, (d) at its discretion to comply with the provisions of any law, regulation or order now or hereafter in force in connection with any of the securities held and (e) to dispose of any moneys collected as aforesaid or received as proceeds of sales of securities by the IF in accordance with valid instructions.

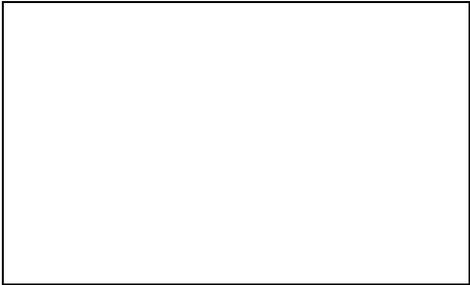
Initials :

8. That the Company hereby agrees that any indebtedness or liability incurred to the IF under this authority shall in the absence of the IF's express written agreement to the contrary be due and payable on demand, together with any costs, expenses and interest.
9. That the Company shall provide all information and or documentation required by the IF and or under Law 87(I)2017 and or the Commission Delegated Regulation (EU) 2017/565 of 25 April 2016 supplementing Directive 2014/65/EU of the European Parliament and of the Council as regards organizational requirements and operating conditions for investment firms and defined terms for the purposes of that Directive, whether in relation to the opening of the relevant client questionnaire or otherwise and or at a later stage in its relationship with the IF and sign any relevant document and or acknowledgement.
10. That the IF be provided with a certified up to date copy of the Company's memorandum and articles of Association and Certificate of Registration, or statutory equivalent, with certified copies of any amending resolutions that may from time to time be passed.
11. That the IF be provided with the names and addresses of all the directors, officers and the secretary and be notified of any changes therein in writing signed by the Chairman and Secretary.
12. That the IF be provided with details of the beneficial ownership of the Company and with any other documentation that may be requested at any time by the IF.
13. That the information above can and may be disclosed to other entities in the group to which the IF belongs to the for their own use.
14. That in consideration of the IF's complying with these resolutions, the Company hereby undertakes to indemnify the IF against any loss, charge or expense, which the IF may suffer or sustain thereby and to absolve the IF from all liability for loss or damage which the Company may sustain from the IF acting on this resolution.
15. The expression director in the above resolutions shall include alternate director.
16. That this Resolution shall be delivered to the IF and remain in force until an amending resolution is passed by the Board of Directors and a copy thereof, certified by the Chairman and Secretary, has been received by the IF.

TABLE 1-AUTHORISED SIGNATORIES		
Name, I.D./Passport Number and Nationality	Position / Capacity	Specimen Signature
1.Name: I.D/Passport: Nationality:
2.Name: I.D/Passport: Nationality:
3.Name: I.D/Passport: Nationality:

Director 1	Director 2
<p>Name:</p> <p>I.D./Passport No:</p> <p>.....</p> <p style="text-align: center;">Signature</p>	<p>Name:</p> <p>I.D./Passport No:</p> <p>.....</p> <p style="text-align: center;">Signature</p>
Director 3	Director 4
<p>Name:</p> <p>I.D./Passport No:</p> <p>.....</p> <p style="text-align: center;">Signature</p>	<p>Name:</p> <p>I.D./Passport No:</p> <p>.....</p> <p style="text-align: center;">Signature</p>

Secretary
<p>Name:</p> <p>I.D./Passport No:</p> <p>_____</p> <p style="text-align: center;">Signature</p>



COMPANY STAMP

**PROPOSED TYPE OF NOTIFICATION OF A DECISION OF THE BOARD
OF DIRECTORS/ADMINISTRATIVE BODY UNDER ARTICLE 35 OF
CSD'S REGULATION OF OPERATION**

To: the **Central Securities Depository/Registry,
CSE**

To be completed by the CSE

Date _____
Time received _____
Received by _____

You are hereby notified that ¹the Board of Directors/Administrative Body of..... with registration no. Share Account no.....and Securities Account no. of which is ²..... has decided the following:
“The signature of any member of the Board of Directors/Administrative Body does not bind the with regard to registrations or other matters in relation to the Central Securities Depository/Registry.

³ For registrations or any other matters in relation to the Central Securities Depository/Registry, will be represented by the following person(s):

Name	Address	Identity Card No.
------	---------	-------------------

⁴ The signing jointly/by each one of the aforementioned persons will bind the until further notice is given to the CSE ».

It is hereby confirmed that the above is a true copy of the decision of the Board of Director/Administrative Body ofand we, the signatories, are duly authorised to communicate this to the CSE.

For

¹ Determine what is applicable.

² Description of the legal personality.

³ To be completed if the legal entity so wishes; otherwise, the legal entity may be represented with a special decision of its Board of Directors or Administrative Body.

⁴ Clarify whether it is the signature of all aforementioned persons or of each one of them acting severally that binds the legal entity or whose signature of the aforementioned binds the legal entity.

Personal data collected by the CSE upon submission of this application are processed for carrying out the transaction / operation / action / service requested, fulfilling the duties of the CSE in the exercise of public authority and / or in the public interest and for compliance with legal obligations. Further information regarding the collection and processing of personal data is included in the CSE privacy policy, which is posted on the following website: <http://www.cse.com.cy/en-GB/home/>

Signature

.....

Signature

.....

Full Name

.....

(in full)

Chairman of the Board of Directors/Administrative
Body

Full name

.....

(in full)

Secretary of the Board of Directors/Administrative
Body

Date



Verification of Signature

Note: If this form is submitted by a person other than the investor or his duly authorised representative, the signature on the form must be verified by a certifying officer, a person responsible under article 19A of the Central Securities Depository/Registry Law or by a foreign competent authority.

POWER OF ATTORNEY

**The Cyprus Stock Exchange and the Cyprus Securities and Exchange Commission note:
It is recommended that prior to signing the investor reads the present power of attorney.
Prior to signing the present power of attorney, the investor is advised to seek legal advice and to
keep in mind that it is possible for Members to conclude transactions on his behalf by a special
or other Power of Attorney.**

BY THIS POWER OF ATTORNEY given on the day of.....

I the undersigned

of.....(address),

Identity Card /Passport / Registration number

and telephone no, representative of -----

with registration number----- and address----- do hereby appoint

and authorize the company **PRO-CHOICE CHRIMATISTIRIAKI LTD with registration no HE 228429**

as my true and lawful

Attorney in my name and on my behalf to do all or any of the following acts:

1. To appear before any Stock Exchange or any other Competent Authority or Member, or Custodian, or Issuer and to take any action in relation to the securities that are today or will hereinafter be registered in my name in any depository and /or registry, including the opening of a Depository Account in my name.
2. To collect the proceeds of sale, any dividends or other benefits that may accrue to me and any Amounts due to me as a result of Stock Exchange transactions and is authorized to issue receipts for the collection or settlement of any amount that the Attorney may receive on my behalf or for my account, and to pay the purchase cost of any securities that he purchases on my behalf.
3. To sign on my behalf and for my account any document, note, agreement, order, transfer, declaration, application, that is relevant to my securities or any transaction of securities as well as any confirmations required regarding executed transactions of purchase or sale.
4. To buy and sell securities, on my behalf and for my account, executing orders given by me orally or in writing and delivered by hand, unless otherwise agreed between the Attorney and my self. For the purposes of this Power of Attorney, the term "securities" means Financial Instruments as this term is interpreted in the Investment Services and Activities and Regulated Markets Law of 2007(as this may, from time to time be amended or replaced).
5. To inform me of any transactions made on my behalf directly to the above-stated address or telephone number.
6. To receive and keep in custody, at the offices of the Attorney that shall be the place of collection for me, any certificates or documents that relate to securities registered in my name or belonging to me including any cheques in relation to dividends or interest or other benefits that may be due to me or that I may be entitled to at any time regarding my securities. If I request that these be forwarded to me, this shall be done to the above-mentioned address at my responsibility.
7. To generally act and sign on my behalf and for my account every transaction and document that is necessary for the sale and transfer of my securities.
8. To proceed with the sale of any of my assets that are in his possession, or under his control in the event that I have any outstanding obligations towards him.
9. By this power of attorney, the Attorney may:

- a. pledge in his favour the securities that have been purchased without the cost of purchase being paid,
 - b. proceed with the sale of the pledged securities if at the end of the sixth working day after the date of purchase the cost of purchase remains unpaid,
 - c. inform the issuer in writing of the payment of the purchase cost, as soon as the purchaser settles in full the amount due.
10. To appoint Members of the Stock Exchange or Custodians to act on my behalf under any terms and to give orders for the purchase or sale of any of my securities, as the attorney shall decide.
11. To appoint or authorise any third party to do any or all of the above mentioned acts.
12. In general to do all such acts whatsoever in relation to any security or account or any other matter in relation to the depository and /or registry as the attorney shall decide.
13. Particularly and without limitation, I authorise the Attorney in my name and on my behalf to:
- a. Open or close operator accounts and to transfer to or from them any securities.
 - b. Transfer any of my shares from the Special Account in the Central Depository and Central Registry to the Operator account.
 - c. Pledge securities registered in my name under any terms, signing on my behalf the relevant agreements.
 - d. Accept and appoint any person as trustee in relation to securities that belong to me or will belong to me hereinafter.
 - e. Transfer any of my securities to the Central Depository S.A.
 - f. Sign on my behalf transfer documents as transferor or transferee under any terms whatsoever.
 - g. Apply on my behalf for the amendment of the details of my Depository Account.
 - h. Apply on my behalf for securing Statements of Balances of Investor Accounts of my Depository Account.

This power of attorney is valid from the date of signing until its written revocation, which can only be done in writing and signed by myself or my heirs and provided that the written revocation is notified to the Attorney by delivery of the written revocation to the Attorney's offices, and to the Stock Exchange and after all pending matters or payments at that time are settled. This power of attorney cannot be revoked in the event that I have any outstanding obligations towards the Attorney.

I HEREBY RATIFY, CONFIRM AND PROMISE at all times to allow ratify and confirm all and whatsoever the Attorney shall lawfully do or cause to be done in and about my affairs by virtue hereof including any thing which shall be done between the revocation of this power of attorney and the receipt of notice of such revocation by the Attorney. And I hereby declare that as against me and persons claiming under me everything which the Attorney shall lawfully do or cause to be done in pursuance of this power of attorney after such revocation shall be valid and effectual in favour of any person claiming the benefit thereof and acting in good faith who before the doing thereof shall not have had express notice of such revocation And I hereby agree to indemnify the Attorney against all costs charges expenses and losses which the attorney may incur in the lawful execution of the powers hereby conferred upon him.

Signed today the.....

Client Signature:

Client's Full Name:.....

Signed (or sealed) this day by _____ in my presence

and in the presence of _____/_____ ,

who are respectively personally known to me and who have declared in my presence that the person signing (or sealing) is _____

and that he/she is personally known to them. In testimony whereof, I have hereto set my hand and official seal, this _____ day of _____ 20 _____

Stamp/Signature