



บริษัท โคมานชี อินเตอร์เนชั่นแนล จำกัด (มหาชน)
 เลขที่ 161 ซอยสุขุมวิท 55 (ทองหล่อ) แขวงคลองตันเหนือ
 เขตวัฒนา กรุงเทพมหานคร 10110
 โทร 02 120 6252
 เลขประจำตัวผู้เสียภาษี 0107559000273

COMANCHE INTERNATIONAL PUBLIC COMPANY LIMITED
 161 Soi Sukhumvit 55 (Thong Lor), Klongtan-nua,
 Wattana, Bangkok 10110
 Tel: 02 120 6252
 Tax ID 0107559000273

Enclosure 3

Affix
 30 THB
 Stamp
 Duty

**Power of Attorney for Subscription of Newly Issued Ordinary Shares
 Of Comanche International Public Company Limited**

Made at.....
 Date.....

I/We, (Mr./Mrs./Miss/Company (“Grantor”)

Shareholder Registration No.

Identification No. / Passport No.

Company Registration No.

Residing at No. Lane/Soi Road

Sub-District District

Province Country Postal Code

being a shareholder of Comanche International Public Company Limited (the “Company”) according to the share register book at the date to fix the names of shareholders (recorded date) as of October 31, 2024, holding shares, am/are entitled to subscribe for the newly issued ordinary shares in the number of shares as per the details set forth in the Certificate of Subscription Rights for Newly Issued Ordinary Shares issued by Thailand Securities Depository Co., Ltd. as the Company’s Registrar.

I/We hereby appoint (Mr./Mrs./Miss)

Identification No. / Passport No

Residing at No. Lane/Soi Road

Sub-District District

Province Country Postal Code

As my/our lawful representative (“Attorney”) to subscribe for the newly issued ordinary shares in the number of shares for me/us or on my/our behalf, including to sign, amend or add any statement(s) in the Subscription form for newly issued ordinary shares and to pay for the subscription payment of the said newly issued ordinary shares, including to perform any other act(s) deemed necessary for the said newly issued ordinary shares subscription to be duly completed. This Power of Attorney shall be in full force and effect for the objectives set forth above. Any action undertaken by the Attorney under this Power of Attorney shall be undertaken by myself/ourselves.

Signature.....Grantor
 (.....)

Signature.....Attorney
 (.....)

Remark: Please attach a certified copy of identification card and/or certificate of business registration of the grantor, and a certified copy of identification card of the authorized signatory (ies) with a certified copy of identification card of the Attorney.