PROXY

I/we, ______ hereby appoint Name of shareholder and personal identification number

Name and personal identification number of representative

as my/our representative, having the power to delegate his/her proxy, to attend and vote for me/us at the Extraordinary General Meeting of Faron Pharmaceuticals Ltd to be held on the 22nd of September 2023 in Turku, Finland.

Date: _____ Place: _____

Shareholder's signature and name in block letters

Voting Instructions

Agenda items 6 to 8 cover proposals of the Board of Directors of Faron Pharmaceuticals Oy to the Extraordinary General Meeting in accordance with the notice of the meeting. To direct your proxy to vote with respect to the proposed resolution, please indicate the manner in which your proxy is to vote by checking (X) the appropriate box below. If you do not check any boxes below, your proxy will vote for the decision proposal contained in the notice to the Annual General Meeting published on 1 September 2023.

The option "For/Yes" means that the shareholder is in favor of approving the proposal. The option "Against/No" means that the shareholder objects to the acceptance of the proposal. "Abstain from voting" means giving an empty vote, in which case the shares are taken into account as shares represented in the handling of the agenda item, which has an impact with respect to resolutions requiring a qualified majority.

| | Resolution item | For/Yes | Against/No | Abstain |
|----|---|---------|------------|---------|
| 6. | Resolution on the number of members of the Board | | | |
| 7. | Election of a new member of the Board | | | |
| 8. | Resolution on the amendment of the Option Plan 2015 | | | |