

APPENDIX 1: MODEL WITHDRAWAL FORM

Dear Customer, this form should only be completed and mailed to you if you wish to withdraw from the agreement.

To Labconsort BV ("Labconsort")

Rue Grevelingen 39/2

1000 Brussels

BE.0767.410.253

Represented by Metin Zwart, Chief Executive Officer & Scientific Director

RPR Brussels

I/We (\*) hereby give notice that I/We (\*) withdraw from my/our (\*) contract of sale of the following goods/supply of the following service (\*):

Ordered on (\*)/Received on (\*):

Name(s) of consumer(s) :

Address of consumer(s) :

Date :

(\*) Delete where not applicable.