

Name and address:

Application Form on Exercise of Listed Options Expiring 10 August 2024

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To the Directors, ADX Energy Ltd		
I/We hereby exercise	option(s) and pay ADX Energy Ltd A	\$
being A\$0.13 per share on application for	ordinary shares	s in the capital of the Company.
I/We request that you allot me that number of Company, and I/we authorise you to place n	of shares and I/we agree to accept that number of share ny/our name on the register.	es on the terms below and the Constitution of the
My/Our SRN/HIN (as shown on my/our Issu holdings statement) is	er Sponsored holding statement or CHESS	<u> </u>
Sign Here – This section must be	signed for your instructions to be execute	ed
I/We authorise you to act in accordance with	• •	
Individual or Securityholder 1	Securityholder 2	Securityholder 3
Director	Director/Company Secretary	Sole Director and Sole Company Secretary
	, the attorney states that they have not received a or Services Pty Limited needs to sight a certified	
Contact Name	Contact Telephone Number	Day/Date Month Year
Email Address		

Lodgement of Notice

This Exercise of Options Notice must be received at the address below by no later than 5.00pm (AWST) on Saturday 10 August 2024.

Payments must be remitted directly to the Company's bank account:

Bank: Commonwealth Bank of Australia Account Name: ADX Energy Ltd BSB: 066 130 Account 10425629 Branch: West Perth WA SWIFT Code CTBAAU2S Please include your SRN/HIN as a reference.

Please email a copy of your completed option exercise form to Admin@adxenergy.com.au once payment has been made. ADX Energy Ltd accepts no responsibility if this Options Notice is lodged at any other address or by any other means.