

The Asymmetric Option can be exercised only for the overall number of shares held by the shareholder (and not for part of them). Therefore, the Asymmetric Option exercised for the shares to be purchased will have to be exercised for the shares already held by the shareholder.

In the event that the Asymmetric Option is exercised for the shares already held by the shareholder, it will have to be exercised also for the shares to be purchased.

In the event that no decision is made, the Asymmetric Option **will be considered as not exercised** and MPS shareholders will receive, upon completion of the Demerger, AMCO Class B Shares in accordance with the exchange ratio of the Demerger.

ACKNOWLEDGES that, if the number of Shares that may remain unopted at the end of the Offer subscription period is lower than the overall number of shares for which the pre-emptive right has been exercised, the shares will be allocated among those who have exercised the pre-emptive right in proportion to the number of options exercised by each of them, as indicated above, and that the overall number of Shares assigned to him/her in the context of the Offer and as a consequence of the exercise of the pre-emption right (if any) will be notified to him/her within the Settlement Date by his/her depository, to whom

CONFERS an irrevocable mandate to pay to MPS the overall amount, as determined above, for the purchase of the Shares, it being understood that the payment of such overall amount and the settlement of the purchased Shares will occur subject to the completion of the Demerger - at the Settlement Date that will be notified afterwards.

CONFIRMS, under his/her own responsibility, for all legal purposes, the accuracy of all the data included in this subscription facsimile.

(date) (Signature of the subscriber of the Offer or of his/her representative)

Personal information and capacity of the person signing on behalf of the legal person that holds the Options

(Surname and name)..... in his/her capacity as:.....
born on at (city)
residence (city).....(street, square)

THE INTERMEDIARY

(Name)

(Contacts) Tel. E-mail

(Stamp and signatory of the Intermediary)