



POWER OF ATTORNEY FORM

Shareholder's Data

*Name and surname / Name**

.....

Address /street, suite number, postal code, city/

.....

*No and indication of identity document/passport/other official identity document/No of the relevant register**

.....

as a Shareholder holding (number) shares of FABRYKI MEBLI "FORTE" S.A. with its registered seat in Ostrów Mazowiecka, I grant a power of attorney to:

Proxy's Data:

*Name and surname / Name**

.....

Address /street, suite number, postal code, city/

.....

*No and indication of identity document/passport/other official identity document/No of the relevant register**

.....

to represent me at the Annual General Meeting of FABRYKI MEBLI "FORTE" S.A., convened for 10:00 a.m. on 17 May 2017 at the Company's seat in Ostrów Mazowiecka at ul. Biała 1 (Poland), and in particular to exercise the voting right from shares indicated in the power of attorney.

(date and signature of the Shareholder)

(date and signature of the Proxy)

delete as appropriate*