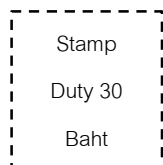


Power of Attorney



For the Subscription of Newly issued Ordinary Shares

Villa Kunalai Public Company Limited ("the Company")

Write at _____

Date (dd/mm/yyyy) _____

I ☐ Mr. ☐ Mrs. ☐ Miss ☐ Juristic person _____ ID Card Number/Juristic person registration number _____ Address specified in the list of shareholders whose names appear in the shareholder registration book as of the date determining the list of shareholders entitled to be allocated the newly issued ordinary shares proportionate to the existing shareholding on 10 March 2023 (Rights Offering) (Record Date) Mobile phone No _____ Nationality _____ currently hold the ordinary shares according to the list of shareholders whose names appear in the shareholder registration book as of the date determining the list of shareholders entitled to be allocated the newly issued ordinary shares proportionate to the existing shareholding on 10 March 2023 (Record Date) with a number of _____ shares and am entitled to subscribe the newly issued ordinary shares with a number of _____ shares. I am hereby to authorize

☐ Mr. ☐ Mrs. ☐ Miss _____ Nationality _____ Age _____ year ID Card Number _____ Address No _____ Road _____ Sub-district _____ District _____ Province _____ Postal code _____ as my attorney to act on my behalf ("Attorney") in the subscription of the new ordinary shares of the Company for Rights Offering ("Subscription") with a number of _____ shares including having the authority to sign, submit documents and make amendments to the contents of the Subscription form and any documented related to the Subscription. Pay any payment related to the Subscription, including any other action necessary in all respects to complete the Subscription for the new ordinary shares.

This Power of Attorney comes into force as of the date specified herein. Any act performed by the Attorney under this Power of Attorney shall be binding upon me as if I had done it myself in all respects. As evidence, it has been signed as important.

Sign _____ Assignor
(_____)

Sign _____ Attorney
(_____)

Sign _____ Witness
(_____)

Sign _____ Witness
(_____)

Note:

1. Please attach a copy of the identity card of the authorized person or a copy of the authorized person's juristic person registration certificate (not more than 6 months) and a copy of the identity card of the authorized signatory. with signature certifying true copy and affix the corporate seal (if any).
2. Copy of the identification card of the attorney with signature certifying true copy.