



# Cryptopia Power of Attorney

## SCHEDULE

### APPOINTOR

Name:			
Address:			
Email:		Mobile:	
User Name:		Email:	
User Name:		Email:	
User Name:		Email:	
User Name:		Email:	

### ATTORNEY

Name:	Accendos Group NZ Limited
Address:	Unit 5, 378 Worcester St, Christchurch, New Zealand
Email:	support@cryptopiarescue.com

### THE PURPOSE

To negotiate with the Liquidator of Cryptopia Limited (in Liquidation) (“Cryptopia”) for the release in specie to the Appointor or his/her nominee of all cryptocurrency held by Cryptopia on trust for the Appointor and its delivery to the Appointor’s and/or nominee’s wallet(s) at Bitcoin.com.  
 To take all lawful and reasonable steps to compel such delivery;  
 To obtain from the Liquidator a statement of all of the cryptocurrency held by the Liquidator on trust for the Appointor;  
 To engage lawyers, accountants and any other professional adviser or service provider and take and prosecute all such actions at law or otherwise as the Attorney shall, entirely in its own discretion, deem to be necessary or desirable to compel and achieve such delivery;

**BE IT KNOWN** that the person whose particulars are set out under the heading “Appointor” in the Schedule above **DOES HEREBY APPOINT ACCENDOS GROUP NZ LIMITED** (“Attorney”) to be the true and lawful attorney for the Appointor for the Purpose set out in the Schedule with full power and authority, by any director or authorised officer of the Attorney, in the name of the Appointor or of the Attorney to sign, execute and deliver all documents and to do and perform all other lawful acts and things necessary to execute, achieve and fulfil the Purpose as fully and effectually as the Appointor might do if personally present and acting therein and with full power of substitution and revocation.

**AND** the Appointor hereby ratifies and confirms and undertakes to ratify and confirm all that the Attorney shall lawfully do or cause to be done by virtue of the appointment hereunder.

I confirm that I am the Appointor or, where the Appointor is not a natural person, a director of the Appointor, of sound mind and with full authority to execute this Power of Attorney.

Name:	
Date:	
Signature:	