Request for registration in the list in order to increase the voting right (the "List")

To be send to: B.F. S.p.A. (the "Company")

Through the Intermediary by certified e-mail to: segre@legalmail.it and copy to: bfspa@legalmail.it

Identification *data* of the party entitled by the voting right to be registered in the List (theApplicant):

Last Name and First Name or Company Name

_____

Italian fiscal code (if any) | | | | | | | | | | | | | | | |

Place of birth _____

Date of birth (ddmmccaa) | | | | | | | | citizenship _____

Address or registered office _____

Town _____ Country _____

e-mail address _____ Telephone _____

Identification data of the Applicant's controlling party:

(only if the Requesting Shareholder is a legal entityor any other entity even without legal personality subject to direct or indirect control)

Name or Company Name

_____

Address or registered office

_____

In rem right qualifying the voting right: *(tick the relevant box)*

☐ ownership	☐ bare ownership	☐ usufruct

Shares to be registered in the List (the Shares):

number of shares _____ Applicant's account _____

Depositary intermediary _____

Statement of the Applicant

The Applicant (i) **declares** that he/she/it took due note of the specific terms and conditions set by the Company in its By-laws and/or in its procedural regulation in order to grant, maintain or revoke the increased voting right, (ii) **declares** that he/she/it has full ownership, both formal and substantive, of thevoting right related to the shares to be registered in the List and (iii) **undertakes** to fulfill any communication or supplementary duty foreseen in the By-laws and/or in the procedural regulation of the Company in order to have the Shares registered in the List and in order to ascertain the entitlement of the Shares to be included or to be maintained in the List or in order to ascertain the loss of the increased votingright granted to the Shares.

Date …….

The Applicant _____

(if the signing party acts on behalf of the entity entitled of the voting right, please fill in the following table includingdata relating to the signing party)

Name _____

Place of birth _____ Date of birth (ddmmccaa) _____

In the quality of (to specify) _____