

PATENTS ACT (CAP. 253)

FORM NO. 2B

POWER OF ATTORNEY

I (We)

(Name and address)

do hereby authorize

to represent me(us) as applicant(s)
in all proceedings related to the processing

of all my(our) patent applications

of international application No.

(check the applicable box)

before the Belize Intellectual Property Office and to make or receive payments on
my(our) behalf.

Place:

Date:

Signature: