ASIC registered agent number

lodging party or agent name EMBELTON LIMITED

office, level, building name or PO Box no.

street number and name 147-149 BAKER ROAD

suburb / city COBURG state/territory VIC postcode 3058

telephone (03) 93534811

facsimile ( )

DX number suburb / city

ASS. REQ-A CASH. REQ-P PROC.

Australian Securities & Investments Commission

form 315

Notification of

resignation, removal or cessation of auditor

Corporations Act 2001
319(5)(a), 324(1) & (2), 327(4) & (15), 329(11)(c), 330

Company name EMBELTON LIMITED.

A.C.N. 004 401 496

Details of company
(tick one box)

☑ public company ☐ proprietary company

Details of resignation, removal or cessation

☑ notice was received of the resignation of the auditor/s
date of receipt of notice of resignation (d/m/y) 29/4/2026

☐ the auditor/s was/were removed from office
date of removal (d/m/y) / /

☐ the auditor is deceased
date of death (d/m/y) / /

☐ the auditor has been disqualified for reasons specified under section 324(1) or (2) of the Corporations Act 2001
date of disqualification (d/m/y) / /

☐ the company is being wound up (refer section 330 of the Corporations Act 2001)
date of resolution or date of Court Order (d/m/y) / /

☐ the company has become a subsidiary of another company (refer subsection 327(15) of the Corporations Act 2001)
retired at AGM held (d/m/y) / /

Details of resigning auditors

name (family & given names)

or if a firm, business name JTP ASSURANCE

office, level, building name

street number & name LEVEL 5 485 LA TROBE STREET

suburb/city MELBOURNE state/territory VIC postcode 3000

name (family & given names)

or if a firm, business name

office, level, building name

street number & name

suburb/city state/territory postcode

Signature

I certify that the information in this form is true and complete.

print name EGIDIO GALGANO capacity COMPANY SECRETARY

sign here

date 4/5/2026