

AMENDMENT OF GUARANTEE



Name and address of your
Nykredit Bank centre/contact

Name of guarantee applicant:

Address of guarantee applicant:

CVR (business registration) or
CPR (civil registration) number

We hereby request Nykredit Bank to amend guarantee number:

GUA-

Guarantee in favour of

Full name of beneficiary:

New expiry date:

New amount:

Other amendments:

Amendment to be forwarded to:

Contact information:

Contact person:

Telephone number:

Terms and conditions for guarantees applies to the amended guarantee.

Nykredit's endorsement:

I/the branch of Nykredit hereby confirm that the signature(s)
of the guarantee applicant is binding and that the guarantee is
granted

Date

Guarantee Applicant's binding signature(s)

Stamp and signature (Nykredit)