

Return of Allotment of Shares

To

Please complete in typescript, or in bold black capitals. CHFP000

Company Number

Company name in full

2937296

From

AVEVA GROOP

Shares allotted (including bonus share:

Date or period during which shares were allotted (If shares were allotted on one date enter that date in the "from" box)

Year Month Year Month Day 21001

Class of shares (ordinary or preference etc)

Number allotted

Nominal value of each share

Amount (if any) paid or due on each share (including any share premium)

ORDINARY	•
5,250	
3·33p	

List the names and addresses of the allottees and the number of shares allotted to each overleaf

If the allotted shares are fully or partly paid up otherwise than in cash please state:

% that each share is to be treated as paid up

Consideration for which the shares were allotted (This information must be supported by the duly stamped contract or by the duly stamped particulars on Form 88(3) if the contract is not in writing)

When you have completed and signed the form send it to the Registrar of Companies at:

Companies House, Crown Way, Cardiff CF14 3UZ

DX 33050 Cardiff

For companies registered in England and Wales

Companies House, 37 Castle Terrace, Edinburgh EH1 2EB For companies registered in Scotland

DX 235 Edinburgh



COMPANIES HOUSE

Names and addresses of the allottees (List joint share allotments consecutively)

	Shareholder details	Shares and share c	lass allotted
Name	KIMIO IMAMURA	Class of shares allotted	Number allotted
Address	2-24-8-203 YUIGAHAMA KAMAKUKA	ordinary 3.33p	<u>्</u> टी,2 र्ड०
t	KANAGAWA, JAPAN		
	UK Postcode		L
Name		Class of shares allotted	Number allotted
Address			
L			
	UK Postcode		
Name		Class of shares allotted	Number allotted
Address			
			L
	UK Postcode		<u></u>
Name		Class of shares allotted	Number allotted
Address		_	•
		_	
	UK Postcode		
Name	<u>, , , , , , , , , , , , , , , , , , , </u>	Class of shares allotted	Number allotted
Address		_	
L		_	
	UK Postcode		<u> </u>
Pleas	se enter the number of continuation sheets (if any) attached to this	s form	
Signed	M. Reciporal Irrector / secretary / administrator / administrative receiver / receiver manager / receiver	ate 28 May 200	ete as appropriate
· -	e the name, address,	r road den	20 do abbiobida

Please give the name, address, telephone number and, if available, a DX number and Exchange of the person Companies House should contact if there is any query

MIRIAM RADFORD, AVEVA GROOP PLC						
HIGH CLOSS,		•	_			
CAMBRIDGE			Tel 01223 556619			
DX number DX exc			nge			