

Form 605
Corporations Act 2001
Section 671B

Notice of ceasing to be a substantial holder

To Company/registered scheme/notified foreign passport fund name

Adheris Health Limited

ACN/ARSN/APFRN

ACN 145 327 617

NFPFRN (if applicable)

1. Details of substantial holder (1)

Name

The following persons:

- EBOS Group Limited ("**EBOS**"); and
- each of the parties listed in Annexure 'A',
(the foregoing persons collectively being the "**Substantial Holders**").

ACN/ARSN/APFRN (if applicable)

NFPFRN (if applicable)

The holder ceased to be a
substantial holder on

1/10/2026

The previous notice was given to the company, or the responsible entity for a registered scheme, or the operator of a notified foreign passport fund on

16/05/2025

The previous notice was dated

16/05/2025

2. Changes in relevant interests

Particulars of each change in, or change in the nature of, a relevant interest (2) of the substantial holder or an associate (3) in voting securities of the company, scheme or fund, since the substantial holder was last required to give a substantial holding notice to the company, scheme or fund are as follows:

Date of change	Person whose relevant interest changed	Nature of change (4)	Consideration given in relation to change (5)	Class (6) and number of securities affected	Person's votes affected
1/10/2026	The Substantial Holders	Disposal of Shares to Jencay Capital Pty Ltd pursuant to a special crossing.	\$269,934.12	26,993,412 Shares	26,993,412
1/10/2026	The Substantial Holders	Disposals of Shares to certain members of the Board and management of the Company pursuant to 10 off-market transfer forms, copies of which are annexed to this Notice as Annexure 'B'.	\$269,934.11	26,993,411 Shares	26,993,411

3. Changes in association

The persons who have become associates (3) of, ceased to be associates of, or have changed the nature of their association (7) with, the substantial holder in relation to voting securities in the company, scheme or fund are as follows:

Name and ACN/ARSN/APFRN (if applicable) and NFPFRN (if applicable)	Nature of association
N/A	N/A

4. Addresses

The addresses of persons named in this form are as follows:

Name	Address
EBOS	Level 7, 737 Bourke Street, Docklands, Victoria 3008
Each of the parties listed in Annexure 'A'	Level 7, 737 Bourke Street, Docklands, Victoria 3008

Signature

print name	Alistair Gray	capacity	Chief Financial Officer
sign here		date	1/10/2026

Annexure A

This is Annexure 'A' of 1 page referred to in the accompanying Form 605, Notice of ceasing to be a substantial holder, lodged for EBOS Group Limited (ARBN 166 840 973) and each of the parties listed in this Annexure 'A'.

Signed on behalf of the Substantial Holders

print name Alistair Gray

capacity Chief Financial Officer

sign here



date

1/10/2026

ABT Medical Pty Ltd	LifeHealthcare Limited	Qpharma Pty Ltd
ABT Nevada LLC	LifeHealthcare Distribution (NZ) Limited	Reward Petfoods Pty Ltd
A.C.N. 004 518 156 Pty Ltd	LifeHealthcare Pty Limited	Richard Thomson Pty Limited
ACN 618 208 969 Pty Ltd	LifeHealthcare Distribution Pty Limited	Sentry Medical Pty Limited
Alchemy Holdings Pty Ltd	LifeHealthcare Finance Pty Limited	Shanghai EBOS Business Management Co Ltd
Alchemy Sub-Holdings Pty Ltd	LifeHealthcare Group Pty Limited	Spiran Pty. Ltd.
AlphaXRT Limited	LifeHealthcare Services Pty Ltd	Superior Pet Food Co. Limited
AlphaXRT Pty Ltd	Lite Living Pty Ltd	Swissmed Pte. Ltd.
Australian Biotechnologies Pty. Limited	LMT Surgical Pty Ltd	Swissmed Sdn Bhd
Beaphar Pty Ltd	Lyppard Australia Pty Ltd	Swiss Med (International) Pte. Ltd.
BFCMC Pty Ltd	Malex Medical Asia (M) Sdn Bhd	Symbion Pty Ltd
Blackhawk Premium Pet Care Pty Ltd	Masterpet Australia Pty Limited	SVS 3PL Limited
Botany Bay Imports Exports Pty Ltd	Masterpet Corporation Limited	SVS Veterinary Supplies Limited
CAB Medical Pty Ltd	Masterpet Logistics Pty Ltd	Terry White Group Pty Ltd
CC Pharmacy Investments Pty Ltd	MD Scopes Pty Ltd	Tissue Technologies Pty Ltd
CC Pharmacy Management Pty Ltd	MD Solutions Australasia Pty Ltd	Tissuelife Pty Limited
CC Pharmacy Promotions Pty Ltd	MD Solutions NZ Limited	Tony Ferguson Weight Management Pty Ltd
Chemmart Holdings Pty Ltd	MediAdvice Pty Limited	T-Medic Co., Ltd
Cincotta Holding Company Pty Ltd	Mediport Pty Ltd	Transmedic Pte Ltd
Clinect Pty Ltd	Mediport NZ Limited	Transmedic China Ltd
Clinect NZ Pty Limited	Mega Save Management Pty Ltd	Transmedic Healthcare Co., Ltd (Vietnam)
Collaboration Medical Clinics Pty Ltd	Minfos Pty Ltd	Transmedic Healthcare Sdn Bhd
Collaboration Medical Clinics Investments Pty Ltd	Mo Milling Pty Ltd	Transmedic Holdings Philippines, Inc
Culpan Distributors Ltd	National Surgical Pty Ltd	Transmedic Philippines, Inc
Culpan Medical Pty Ltd	Next Generation Pet Foods Pty Ltd	Transmedic (Thailand) Co. Ltd
DoseAid Pty Ltd	Nexus Australasia Pty Limited	TW&CM Pty Ltd
EAHPL Pty Ltd	NGPF Pty Ltd	TWC IP Pty Ltd
EBOS Aesthetics Pty Ltd	Ophthaswissmed Philippines Inc	Ventura Health Pty Ltd
EBOS Finance Australia Pty Ltd	Origin Biologics LLC	Vet2Pet Limited
EBOS Finance NZ Limited	Pacific Health Supplies TopCo1 Pty Limited	VIM Health Pty Ltd
EBOS Group Australia Pty Ltd	Pacific Health Supplies TopCo2 LLC	VIM Health IP Pty Ltd
EBOS Health & Science Pty Ltd	Pacific Health Supplies BidCo Pty Limited	Vitapet Corporation Pty Limited
EBOS Medical Devices Australia Pty Ltd	Pacific Health Supplies HoldCo Pty Limited	W & W Management Services Pty Ltd
EBOS Medical Devices NZ Limited	Pacific Health Supplies MezzCo Pty Limited	W M Bamford & Co Limited
EBOS PH Pty Ltd	Pacific Health Supplies TopCo Pty Limited	You Save Management Pty Ltd
Endeavour CH Pty Ltd	PBA Finance No. 1 Pty Ltd	ZAP Services Pty Ltd
Endeavour Consumer Health Limited	PBA Finance No. 2 Pty Ltd	ZHHA Pty Ltd
Fibertech Medical Australia Pty Ltd	PBA Technology Pty Ltd	
Healthcare Supply Partners Pty Ltd	PBA Wholesale Pty Ltd	
Hospharm Pty Ltd	Pet Care Distributors Pty Ltd	
HPS Brands Pty Ltd	Pet Care Holdings Australia Pty Ltd	
HPS Corrections Pty Ltd	Pet Care Wholesalers Pty Ltd	
HPS Finance Pty Ltd	Pets International Pty Ltd	
HPS Holdings Group (Aust) Pty Ltd	Pharmacy Brands Australia Pty Ltd	
HPS Hospitals Pty Ltd	Pharmacy Retailing (NZ) Limited	
HPS IVF Pty Ltd	Pioneer Medical Limited	
HPS Services Pty Ltd	PPD Limited	
Intellipharm Pty Ltd	Precision Surgical Pty Ltd	
Jackson Allison Medical & Surgical Limited	Protec Solutions Limited	
K-Talyst Pte. Ltd.	PRNZ Limited	
K Talyst (M) Sdn Bhd	PT Transmedic Indonesia	

Annexure B

This is Annexure 'B' of 11 pages referred to in the accompanying Form 605, Notice of ceasing to be a substantial holder, lodged for EBOS Group Limited (ARBN 166 840 973) and each of the parties listed in Annexure 'A' .

Standard Transfer Form

Please use block letters and black or blue pen when completing this form, where relevant

1	Details of Issuer	Full Name of Company/Trust in which Securities are held Adheris Health Limited ACN 145 327 617	ASX Code for the Company/Trust AHE	State or Territory of Registration NSW
2	Description of Securities	Class (for example Ordinary Fully Paid Shares, Options and applicable expiry date, etc.) Ordinary Fully Paid Shares		If not fully paid, paid to:
3	Quantity of Securities	Amount in Words FOUR MILLION, SIXTY EIGHT THOUSAND, SIX HUNDRED AND NINETY FOUR		Figures 4,068,694
4	Consideration - value of transfer	\$ 40,686.94		Date of Transfer 30 / 09 / 26
5	Full registered name(s) of Seller(s)/ Transferor(s)	Title Given name(s)/Company name/Estate name Surname EBOS PH Pty Ltd ACN 613 974 253		
6	Seller(s) Securityholder Reference Number	SRN (must be quoted)		
7	Full name(s) of Buyer(s)/ Transferee(s)	Title Given name(s)/Company name Surname Lorraine Michele Caiazzo		
8	Full postal address of Buyer(s)	Postcode Country		
9	Buyer(s) Securityholder Reference Number	SRN (if transferring to an existing account)		
I/We the registered holder(s) and undersigned seller(s) for the above consideration do hereby transfer to the above named hereinafter called the buyer(s) the securities as specified above standing in my/our name(s) in the books of the above company, subject to the several conditions on which I/we held the same at the time of signing hereof and I/We the buyer(s) do hereby agree to accept the said securities subject to the same conditions. I/We have not received any notice of revocation of the Power of Attorney by death of the grantor or otherwise, under which this transfer is signed (if applicable).				
10	All Seller(s) must sign here	Individual or Securityholder 1 or Executor 1 Securityholder 2 or Executor 2 Securityholder 3 or Executor 3		
		Sole Director and Sole Company Secretary/ Sole Director (no Company Secretary) (cross out titles as applicable) Alistair Gray Names of Signatory 1 (please print) Date: 30 / 09 / 26 Contact Name: Daytime Phone Number : Email Address:		
11	All Buyer(s) must sign here	Individual or Securityholder 1 or Executor 1 Securityholder 2 or Executor 2 Securityholder 3 or Executor 3		
		Sole Director and Sole Company Secretary/ Sole Director (no Company Secretary) (cross out titles as applicable) Lorraine Michele Caiazzo Names of Signatory 1 (please print) Date: 24 September 2026 10:21 AEST Contact Name: Lorraine Michele Caiazzo Daytime Phone Number : Email Address:		



Standard Transfer Form

Please use block letters and black or blue pen when completing this form, where relevant

1	Details of Issuer	Full Name of Company/Trust in which Securities are held Adheris Health Limited ACN 145 327 617	ASX Code for the Company/Trust AHE	State or Territory of Registration NSW
2	Description of Securities	Class (for example Ordinary Fully Paid Shares, Options and applicable expiry date, etc.) Ordinary Fully Paid Shares		If not fully paid, paid to:
3	Quantity of Securities	Amount in Words TWO MILLION, NINE HUNDRED AND SIX THOUSAND, TWO HUNDRED AND ELEVEN		Figures 2,906,211
4	Consideration - value of transfer	\$ 29,062.11		Date of Transfer 30 / 09 / 26
5	Full registered name(s) of Seller(s)/ Transferor(s)	Title Given name(s)/Company name/Estate name Surname EBOS PH Pty Ltd ACN 613 974 253		
6	Seller(s) Securityholder Reference Number	SRN (must be quoted)		
7	Full name(s) of Buyer(s)/ Transferee(s)	Title Given name(s)/Company name Surname John Ciccio		
8	Full postal address of Buyer(s)	Postcode Country		
9	Buyer(s) Securityholder Reference Number	SRN (if transferring to an existing account)		
I/We the registered holder(s) and undersigned seller(s) for the above consideration do hereby transfer to the above named hereinafter called the buyer(s) the securities as specified above standing in my/our name(s) in the books of the above company, subject to the several conditions on which I/we held the same at the time of signing hereof and I/We the buyer(s) do hereby agree to accept the said securities subject to the same conditions. I/We have not received any notice of revocation of the Power of Attorney by death of the grantor or otherwise, under which this transfer is signed (if applicable).				
10	All Seller(s) must sign here	Individual or Securityholder 1 or Executor 1	Securityholder 2 or Executor 2	Securityholder 3 or Executor 3
11	All Buyer(s) must sign here	Individual or Securityholder 1 or Executor 1	Securityholder 2 or Executor 2	Securityholder 3 or Executor 3



Standard Transfer Form

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1	Details of Issuer	Full Name of Company/Trust in which Securities are held Adheris Health Limited ACN 145 327 617		ASX Code for the Company/Trust AHE	State or Territory of Registration NSW
2	Description of Securities	Class (for example Ordinary Fully Paid Shares, Options and applicable expiry date, etc.) Ordinary Fully Paid Shares			If not fully paid, paid to:
3	Quantity of Securities	Amount in Words ONE MILLION			Figures 1,000,000
4	Consideration - value of transfer	\$ 10,000.00			Date of Transfer 30 / 09 / 26
5	Full registered name(s) of Seller(s)/ Transferor(s)	Title Given name(s)/Company name/Estate name Surname EBOS PH Pty Ltd ACN 613 974 253			
6	Seller(s) Securityholder Reference Number	SRN (must be quoted)			
7	Full name(s) of Buyer(s)/ Transferee(s)	Title Given name(s)/Company name Surname Kate Hill			
8	Full postal address of Buyer(s)	Postcode Country			
9	Buyer(s) Securityholder Reference Number	SRN (if transferring to an existing account)			
I/We the registered holder(s) and undersigned seller(s) for the above consideration do hereby transfer to the above named hereinafter called the buyer(s) the securities as specified above standing in my/our name(s) in the books of the above company, subject to the several conditions on which I/we held the same at the time of signing hereof and I/We the buyer(s) do hereby agree to accept the said securities subject to the same conditions. I/We have not received any notice of revocation of the Power of Attorney by death of the grantor or otherwise, under which this transfer is signed (if applicable).					
10	All Seller(s) must sign here	Individual or Securityholder 1 or Executor 1 Securityholder 2 or Executor 2 Securityholder 3 or Executor 3			
		Sole Director and Sole Company Secretary/ Sole Director (no Company Secretary) (cross out titles as applicable) Alistair Gray Names of Signatory 1 (please print) Date: 30 / 09 / 26 Contact Name: Daytime Phone Number : Email Address:			
11	All Buyer(s) must sign here	Individual or Securityholder 1 or Executor 1 Securityholder 2 or Executor 2 Securityholder 3 or Executor 3			
		Sole Director and Sole Company Secretary/ Sole Director (no Company Secretary) (cross out titles as applicable) Kate Hill Names of Signatory 1 (please print) Date: 23 September 2026 10:54 AEST Contact Name: Kate Hill Daytime Phone Number : Email Address:			



Standard Transfer Form

Please use block letters and black or blue pen when completing this form, where relevant

1	Details of Issuer	Full Name of Company/Trust in which Securities are held Adheris Health Limited ACN 145 327 617	ASX Code for the Company/Trust AHE	State or Territory of Registration NSW
2	Description of Securities	Class (for example Ordinary Fully Paid Shares, Options and applicable expiry date, etc.) Ordinary Fully Paid Shares		If not fully paid, paid to:
3	Quantity of Securities	Amount in Words TWO MILLION, NINE HUNDRED AND SIX THOUSAND, TWO HUNDRED AND ELEVEN		Figures 2,906,211
4	Consideration - value of transfer	\$ 29,062.11		Date of Transfer 30 / 09 / 26
5	Full registered name(s) of Seller(s)/ Transferor(s)	Title Given name(s)/Company name/Estate name Surname EBOS PH Pty Ltd ACN 613 974 253		
6	Seller(s) Securityholder Reference Number	SRN (must be quoted)		
7	Full name(s) of Buyer(s)/ Transferee(s)	Title Given name(s)/Company name Surname Sudhir Jain		
8	Full postal address of Buyer(s)	Postcode Country		
9	Buyer(s) Securityholder Reference Number	SRN (if transferring to an existing account)		
I/We the registered holder(s) and undersigned seller(s) for the above consideration do hereby transfer to the above named hereinafter called the buyer(s) the securities as specified above standing in my/our name(s) in the books of the above company, subject to the several conditions on which I/we held the same at the time of signing hereof and I/We the buyer(s) do hereby agree to accept the said securities subject to the same conditions. I/We have not received any notice of revocation of the Power of Attorney by death of the grantor or otherwise, under which this transfer is signed (if applicable).				
10	All Seller(s) must sign here	Individual or Securityholder 1 or Executor 1 Securityholder 2 or Executor 2 Securityholder 3 or Executor 3		
		Sole Director and Sole Company Secretary/ Sole Director (no Company Secretary) (cross out titles as applicable) Alistair Gray Names of Signatory 1 (please print) Date: 30 / 09 / 26 Contact Name: Daytime Phone Number : Email Address:		
11	All Buyer(s) must sign here	Individual or Securityholder 1 or Executor 1 Securityholder 2 or Executor 2 Securityholder 3 or Executor 3		
		Sole Director and Sole Company Secretary/ Sole Director (no Company Secretary) (cross out titles as applicable) Sudhir Jain Names of Signatory 1 (please print) Date: 22 September 2026 12:57 AEST Contact Name: Sudhir Jain Daytime Phone Number : Email Address:		



Standard Transfer Form

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1	Details of Issuer	Full Name of Company/Trust in which Securities are held Adheris Health Limited ACN 145 327 617	ASX Code for the Company/Trust AHE	State or Territory of Registration NSW
2	Description of Securities	Class (for example Ordinary Fully Paid Shares, Options and applicable expiry date, etc.) Ordinary Fully Paid Shares		If not fully paid, paid to:
3	Quantity of Securities	Amount in Words FIVE MILLION, EIGHT HUNDRED AND TWELVE THOUSAND, FOUR HUNDRED AND TWENTY		Figures 5,812,420
4	Consideration - value of transfer	\$ 58,124.20		Date of Transfer 30 / 09 / 26
5	Full registered name(s) of Seller(s)/ Transferor(s)	Title Given name(s)/Company name/Estate name Surname EBOS PH Pty Ltd ACN 613 974 253		
6	Seller(s) Securityholder Reference Number	SRN (must be quoted)		
7	Full name(s) of Buyer(s)/ Transferee(s)	Title Given name(s)/Company name Surname Shafali Khandelwal		
8	Full postal address of Buyer(s)	Postcode Country		
9	Buyer(s) Securityholder Reference Number	SRN (if transferring to an existing account)		
I/We the registered holder(s) and undersigned seller(s) for the above consideration do hereby transfer to the above named hereinafter called the buyer(s) the securities as specified above standing in my/our name(s) in the books of the above company, subject to the several conditions on which I/we held the same at the time of signing hereof and I/We the buyer(s) do hereby agree to accept the said securities subject to the same conditions. I/We have not received any notice of revocation of the Power of Attorney by death of the grantor or otherwise, under which this transfer is signed (if applicable).				
10	All Seller(s) must sign here	Individual or Securityholder 1 or Executor 1 Securityholder 2 or Executor 2 Securityholder 3 or Executor 3		
		Sole Director and Sole Company Secretary/ Sole Director (no Company Secretary) (cross out titles as applicable) Alistair Gray Names of Signatory 1 (please print) Date: 30 / 09 / 26 Contact Name: Daytime Phone Number : Email Address:		
11	All Buyer(s) must sign here	Individual or Securityholder 1 or Executor 1 Securityholder 2 or Executor 2 Securityholder 3 or Executor 3		
		Sole Director and Sole Company Secretary/ Sole Director (no Company Secretary) (cross out titles as applicable) Shafali Khandelwal Names of Signatory 1 (please print) Date: 22 September 2026 12:34 AEST Contact Name: Shafali Khandelwal Daytime Phone Number : Email Address:		



Standard Transfer Form

Please use block letters and black or blue pen when completing this form, where relevant

1	Details of Issuer	Full Name of Company/Trust in which Securities are held Adheris Health Limited ACN 145 327 617	ASX Code for the Company/Trust AHE	State or Territory of Registration NSW
2	Description of Securities	Class (for example Ordinary Fully Paid Shares, Options and applicable expiry date, etc.) Ordinary Fully Paid Shares		If not fully paid, paid to:
3	Quantity of Securities	Amount in Words TWO MILLION, NINE HUNDRED AND SIX THOUSAND, TWO HUNDRED AND ELEVEN		Figures 2,906,211
4	Consideration - value of transfer	\$ 29,062.11		Date of Transfer 30 / 09 / 26
5	Full registered name(s) of Seller(s)/ Transferor(s)	Title Given name(s)/Company name/Estate name Surname EBOS PH Pty Ltd ACN 613 974 253		
6	Seller(s) Securityholder Reference Number	SRN (must be quoted)		
7	Full name(s) of Buyer(s)/ Transferee(s)	Title Given name(s)/Company name Surname Lucas Merrow		
8	Full postal address of Buyer(s)	Postcode Country		
9	Buyer(s) Securityholder Reference Number	SRN (if transferring to an existing account)		
I/We the registered holder(s) and undersigned seller(s) for the above consideration do hereby transfer to the above named hereinafter called the buyer(s) the securities as specified above standing in my/our name(s) in the books of the above company, subject to the several conditions on which I/we held the same at the time of signing hereof and I/We the buyer(s) do hereby agree to accept the said securities subject to the same conditions. I/We have not received any notice of revocation of the Power of Attorney by death of the grantor or otherwise, under which this transfer is signed (if applicable).				
10	All Seller(s) must sign here	Individual or Securityholder 1 or Executor 1	Securityholder 2 or Executor 2	Securityholder 3 or Executor 3
		Sole Director and Sole Company Secretary/ Sole Director (no Company Secretary) (cross out titles as applicable) Alistair Gray Names of Signatory 1 (please print) Date: 30 / 09 / 26 Contact Name: Daytime Phone Number : Email Address:		
11	All Buyer(s) must sign here	Individual or Securityholder 1 or Executor 1	Securityholder 2 or Executor 2	Securityholder 3 or Executor 3
		Sole Director and Sole Company Secretary/ Sole Director (no Company Secretary) (cross out titles as applicable) Lucas Merrow Names of Signatory 1 (please print) Date: 22 September 2026 12:59 AEST Contact Name: Lucas Merrow Daytime Phone Number : Email Address:		



Standard Transfer Form

Please use block letters and black or blue pen when completing this form, where relevant

1	Details of Issuer	Full Name of Company/Trust in which Securities are held Adheris Health Limited ACN 145 327 617	ASX Code for the Company/Trust AHE	State or Territory of Registration NSW
2	Description of Securities	Class (for example Ordinary Fully Paid Shares, Options and applicable expiry date, etc.) Ordinary Fully Paid Shares		If not fully paid, paid to:
3	Quantity of Securities	Amount in Words ONE MILLION		Figures 1,000,000
4	Consideration - value of transfer	\$ 10,000.00		Date of Transfer 30 / 09 / 26
5	Full registered name(s) of Seller(s)/ Transferor(s)	Title Given name(s)/Company name/Estate name Surname EBOS PH Pty Ltd ACN 613 974 253		
6	Seller(s) Securityholder Reference Number	SRN (must be quoted)		
7	Full name(s) of Buyer(s)/ Transferee(s)	Title Given name(s)/Company name Surname Nanjop Pty Ltd ACN 078 498 790 (in its capacity as trustee of the Murring Family Trust)		
8	Full postal address of Buyer(s)	Postcode Country		
9	Buyer(s) Securityholder Reference Number	SRN (if transferring to an existing account)		
I/We the registered holder(s) and undersigned seller(s) for the above consideration do hereby transfer to the above named hereinafter called the buyer(s) the securities as specified above standing in my/our name(s) in the books of the above company, subject to the several conditions on which I/we held the same at the time of signing hereof and I/We the buyer(s) do hereby agree to accept the said securities subject to the same conditions. I/We have not received any notice of revocation of the Power of Attorney by death of the grantor or otherwise, under which this transfer is signed (if applicable).				
10	All Seller(s) must sign here	Individual or Securityholder 1 or Executor 1 Securityholder 2 or Executor 2 Securityholder 3 or Executor 3		
		Sole Director and Sole Company Secretary/ Sole Director (no Company Secretary) (cross out titles as applicable) Alistair Gray Names of Signatory 1 (please print) Date: 30 / 09 / 26 Contact Name: Daytime Phone Number : Email Address:		
11	All Buyer(s) must sign here	Individual or Securityholder 1 or Executor 1 Securityholder 2 or Executor 2 Securityholder 3 or Executor 3		
		Sole Director and Sole Company Secretary/ Sole Director (no Company Secretary) (cross out titles as applicable) John Murray Pamela Dingwall Names of Signatory 1 (please print) Names of Signatory 2 (please print) Names of Signatory 3 (please print) Date: 23 September 2026 16:39 AEST Contact Name: John Murray Daytime Phone Number : Email Address:		



Standard Transfer Form

Please use block letters and black or blue pen when completing this form, where relevant

1	Details of Issuer	Full Name of Company/Trust in which Securities are held Adheris Health Limited ACN 145 327 617		ASX Code for the Company/Trust AHE	State or Territory of Registration NSW
2	Description of Securities	Class (for example Ordinary Fully Paid Shares, Options and applicable expiry date, etc.) Ordinary Fully Paid Shares			If not fully paid, paid to:
3	Quantity of Securities	Amount in Words TWO MILLION, NINE HUNDRED AND SIX THOUSAND, TWO HUNDRED AND ELEVEN			Figures 2,906,211
4	Consideration - value of transfer	\$ 29,062.11			Date of Transfer 30 / 09 / 26
5	Full registered name(s) of Seller(s)/ Transferor(s)	Title Given name(s)/Company name/Estate name Surname EBOS PH Pty Ltd ACN 613 974 253			
6	Seller(s) Securityholder Reference Number	SRN (must be quoted)			
7	Full name(s) of Buyer(s)/ Transferee(s)	Title Given name(s)/Company name Surname James Rotsart			
8	Full postal address of Buyer(s)	Postcode Country			
9	Buyer(s) Securityholder Reference Number	SRN (if transferring to an existing account)			
I/We the registered holder(s) and undersigned seller(s) for the above consideration do hereby transfer to the above named hereinafter called the buyer(s) the securities as specified above standing in my/our name(s) in the books of the above company, subject to the several conditions on which I/we held the same at the time of signing hereof and I/We the buyer(s) do hereby agree to accept the said securities subject to the same conditions. I/We have not received any notice of revocation of the Power of Attorney by death of the grantor or otherwise, under which this transfer is signed (if applicable).					
10	All Seller(s) must sign here	Individual or Securityholder 1 or Executor 1 Securityholder 2 or Executor 2 Securityholder 3 or Executor 3			
		Sole Director and Sole Company Secretary/ Sole Director (no Company Secretary) (cross out titles as applicable) Alistair Gray Names of Signatory 1 (please print) Date: 30 / 09 / 26 Contact Name: Daytime Phone Number : Email Address:			
11	All Buyer(s) must sign here	Individual or Securityholder 1 or Executor 1 Securityholder 2 or Executor 2 Securityholder 3 or Executor 3			
		Sole Director and Sole Company Secretary/ Sole Director (no Company Secretary) (cross out titles as applicable) James Rotsart Names of Signatory 1 (please print) Date: 23 September 2026 10:42:28 AEST Contact Name: James Rotsart Daytime Phone Number : Email Address:			



Standard Transfer Form

Please use block letters and black or blue pen when completing this form, where relevant

1	Details of Issuer	Full Name of Company/Trust in which Securities are held Adheris Health Limited ACN 145 327 617		ASX Code for the Company/Trust AHE	State or Territory of Registration NSW
2	Description of Securities	Class (for example Ordinary Fully Paid Shares, Options and applicable expiry date, etc.) Ordinary Fully Paid Shares			If not fully paid, paid to:
3	Quantity of Securities	Amount in Words FIVE HUNDRED AND EIGHTY ONE THOUSAND, TWO HUNDRED AND FORTY TWO			Figures 581,242
4	Consideration - value of transfer	\$ 5,812.42			Date of Transfer 30 / 09 / 26
5	Full registered name(s) of Seller(s)/ Transferor(s)	Title Given name(s)/Company name/Estate name Surname EBOS PH Pty Ltd ACN 613 974 253			
6	Seller(s) Securityholder Reference Number	SRN (must be quoted)			
7	Full name(s) of Buyer(s)/ Transferee(s)	Title Given name(s)/Company name Surname Kirsten Sollows			
8	Full postal address of Buyer(s)	Postcode Country			
9	Buyer(s) Securityholder Reference Number	SRN (if transferring to an existing account)			
I/We the registered holder(s) and undersigned seller(s) for the above consideration do hereby transfer to the above named hereinafter called the buyer(s) the securities as specified above standing in my/our name(s) in the books of the above company, subject to the several conditions on which I/we held the same at the time of signing hereof and I/We the buyer(s) do hereby agree to accept the said securities subject to the same conditions. I/We have not received any notice of revocation of the Power of Attorney by death of the grantor or otherwise, under which this transfer is signed (if applicable).					
10	All Seller(s) must sign here	Individual or Securityholder 1 or Executor 1 Securityholder 2 or Executor 2 Securityholder 3 or Executor 3			
		Sole Director and Sole Company Secretary/ Sole Director (no Company Secretary) (cross out titles as applicable) Alistair Gray Names of Signatory 1 (please print) Date: 30 / 09 / 26 Contact Name: Daytime Phone Number : Email Address:			
11	All Buyer(s) must sign here	Individual or Securityholder 1 or Executor 1 Securityholder 2 or Executor 2 Securityholder 3 or Executor 3			
		Sole Director and Sole Company Secretary/ Sole Director (no Company Secretary) (cross out titles as applicable) Kirsten Sollows Names of Signatory 1 (please print) Date: 22 September 2026 12:02 AEST Contact Name: Kirsten Sollows Daytime Phone Number : Email Address:			



Standard Transfer Form

Please use block letters and black or blue pen when completing this form, where relevant

1	Details of Issuer	Full Name of Company/Trust in which Securities are held Adheris Health Limited ACN 145 327 617	ASX Code for the Company/Trust AHE	State or Territory of Registration NSW
2	Description of Securities	Class (for example Ordinary Fully Paid Shares, Options and applicable expiry date, etc.) Ordinary Fully Paid Shares		If not fully paid, paid to:
3	Quantity of Securities	Amount in Words TWO MILLION, NINE HUNDRED AND SIX THOUSAND, TWO HUNDRED AND ELEVEN		Figures 2,906,211
4	Consideration - value of transfer	\$ 29,062.11		Date of Transfer 30 / 09 / 26
5	Full registered name(s) of Seller(s)/ Transferor(s)	Title Given name(s)/Company name/Estate name Surname EBOS PH Pty Ltd ACN 613 974 253		
6	Seller(s) Securityholder Reference Number	SRN (must be quoted)		
7	Full name(s) of Buyer(s)/ Transferee(s)	Title Given name(s)/Company name Surname Julie Van Inwegen		
8	Full postal address of Buyer(s)	Postcode Country		
9	Buyer(s) Securityholder Reference Number	SRN (if transferring to an existing account)		
I/We the registered holder(s) and undersigned seller(s) for the above consideration do hereby transfer to the above named hereinafter called the buyer(s) the securities as specified above standing in my/our name(s) in the books of the above company, subject to the several conditions on which I/we held the same at the time of signing hereof and I/We the buyer(s) do hereby agree to accept the said securities subject to the same conditions. I/We have not received any notice of revocation of the Power of Attorney by death of the grantor or otherwise, under which this transfer is signed (if applicable).				
10	All Seller(s) must sign here	Individual or Securityholder 1 or Executor 1 Securityholder 2 or Executor 2 Securityholder 3 or Executor 3		
		Sole Director and Sole Company Secretary/ Sole Director (no Company Secretary) (cross out titles as applicable) Alistair Gray Names of Signatory 1 (please print) Date: 30 / 09 / 26 Contact Name: Daytime Phone Number : Email Address:		
11	All Buyer(s) must sign here	Individual or Securityholder 1 or Executor 1 Securityholder 2 or Executor 2 Securityholder 3 or Executor 3		
		Sole Director and Sole Company Secretary/ Sole Director (no Company Secretary) (cross out titles as applicable) Julie Van Inwegen Names of Signatory 1 (please print) Date: 22 September 2026 12:03 AEST Contact Name: Julie Van Inwegen Daytime Phone Number : Email Address:		

