

GLOBAL CARE CAPITAL INC.

Security Class: Common Shares

FORM OF PROXY

Annual General & Special Meeting to be held on Friday October 15, 2021

This Form of Proxy is solicited by and on behalf of Management.

Notes to proxy

Every holder has the right to appoint some other person or company of their choice, who need not be a holder, to attend and act on their behalf at the meeting or any adjournment or postponement thereof. If you wish to appoint a person or company other than the persons whose names are printed herein, please insert the name of your chosen proxyholder in the space provided.

If the securities are registered in the name of more than one owner (for example, joint ownership, trustees, executors, etc.), then all those registered should sign this proxy. If you are voting on behalf of a corporation or another individual you must sign this proxy with signing capacity stated, and you may be required to provide documentation evidencing your power to sign this proxy.

This proxy should be signed in the exact manner as the name(s) appear(s) on the proxy.

If this proxy is not dated, it will be deemed to bear the date on which it is mailed by Management to the holder.

If you appoint the Management Nominees to vote your securities, they will vote in accordance with your instructions or, if no instructions are given, in accordance with the Management Voting Recommendations highlighted for each Resolution overleaf. If you appoint someone else to vote your securities, they will also vote in accordance with your instructions or, if no instructions are given, as they in their discretion choose.

This proxy confers discretionary authority in respect of amendments or variations to matters identified in the Notice of Meeting or other matters that may properly come before the meeting or any adjournment or postponement thereof.

This proxy should be read in conjunction with the accompanying documentation provided by Management.

Proxies submitted must be received by 10:00 am, Pacific Time, on Wednesday October 13, 2021, or in the case of any adjournment or postponement of the Meeting not less than 48 hours (Saturdays, Sundays and holidays excepted) before the time of the adjourned or postponed meeting.

In order to be valid, you must return the completed form of proxy to our Transfer Agent, National Securities Administrators Ltd. at their offices located at 702 – 777 Hornby Street, Vancouver, British Columbia, V6Z 1S2, by mail, or by fax at 604-559-8908, or by email at proxy@transferagent.ca, or by mail or by hand not less than 48 hours (excluding Saturdays, Sundays and holidays) before the Meeting or the adjournment thereof at which the proxy is to be used.

VOTING METHODS	
MAIL or HAND DELIVERY	National Securities Administrators Ltd. 702 – 777 Hornby Street Vancouver, BC V6Z 1S4
FACSIMILE – 24 Hours a Day	604-559-8908
EMAIL	proxy@transferagent.ca
ONLINE	As listed on Form of Proxy or Voter Information Card

If you vote by FAX, EMAIL or On-Line, DO NOT mail back this proxy.

Voting by mail, fax or by email are the only methods by which a holder may appoint a person as proxyholder other than the Management nominees named on the reverse of this proxy.

GLOBAL CARE CAPITAL INC.

Appointment of Proxyholder

I/We, being holder(s) of **GLOBAL CARE CAPITAL INC.** hereby appoint: **ALEXANDER SOMJEN, CEO**, President and a Director of the Company, or, failing him, **TROY GRANT**, a Director of the Company

OR Print the name of the person you are appointing if this person is someone other than the Management Nominee listed herein.

as my/our proxyholder with full power of substitution and to attend, act and to vote for and on behalf of the shareholder in accordance with the following direction (or if no directions have been given, as the proxyholder sees fit) and all other matters that may properly come before the Annual General and Special Meeting of shareholders of **GLOBAL CARE CAPITAL INC.** to be held at **789 West Pender Street, Suite 810, Vancouver, BC V6C 1H2 on Friday, October 15, 2021 at 10:00 am**, Pacific Time, and at any adjournment or postponement thereof.

VOTING RECOMMENDATIONS ARE INDICATED BY HIGHLIGHTED TEXT OVER THE BOXES.

1. Number of Directors

To fix the number of Directors at 3 (three)

For	Against
<input type="checkbox"/>	<input type="checkbox"/>

2. Election of Directors

- 1) **ALEXANDER SOMJEN**
- 2) **MACIEJ LIS**
- 3) **TROY GRANT**

For	Withhold
<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>

3. Appointment of Auditor

To appoint **MANNING ELLIOTT LLP**, Chartered Professional Accountants, as auditor of the Company for the ensuing year and to authorize the directors to determine their remuneration

For	Withhold
<input type="checkbox"/>	<input type="checkbox"/>

4. Other Matters

- 1) To approve an ordinary resolution ratifying, confirming and approving the Company's current stock option plan
- 2) To approve, with or without variation, an ordinary resolution ratifying, confirming and approving the Change of Business of the Company as set out in the Information Circular for the Meeting
- 3) To approve an ordinary resolution of disinterested shareholders ratifying, confirming and approving the removal of the voluntary restrictions on the common shares and share purchase warrants issued by the Company in connection with the acquisition of CCM Technologies Inc. as set out in the Information Circular for the Meeting
- 4) To approve an ordinary resolution adopting a new form of Articles for the Company as set out in the Information Circular for the Meeting

For	Against
<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>

Authorized Signature(s) – This section must be completed for your instructions to be executed. Signature(s)

I/We authorize you to act in accordance with my/our instructions set out above. I/We hereby revoke any proxy previously given with respect to the Meeting. **If no voting instructions are indicated above, this Proxy will be voted as recommended by Management.**

Print Name(s) & Signing Capacity(ies), if applicable

Date (MM-DD-YY)
THIS PROXY MUST BE DATED