## FORM 9 CERTIFICATE OF SUBSTANTIAL PERFORMANCE OF THE CONTRACT UNDER SECTION 32 OF THE ACT

Construction Act

| TORONTO, ONTARIO  |                                       |
|---|---------------------------------------|
| (County/District/Regional Municipality/Town/City in which premises are situated)  |                                       |
| 200 KING STREET WEST  |                                       |
| (street address and city, town, etc., or, if there is no street address, the location of the premises)  | · · · · · · · · · · · · · · · · · · · |
| This is to certify that the contract for the following improvement:   |                                       |
| SWITCHGEAR BREAKER REPLACEMENT  |                                       |
| (short description of the improvement)  |                                       |
| to the above premises was substantially performed on 2025-01-29   |                                       |
| (date substantially performed)  |                                       |
| Date certificate signed: 2025-03-31   |                                       |
| Smith and Andersen Consulting, Jack Zhang   |                                       |
| (payment certifier where there is one - signature required) (owner and contractor, where there is no payment certified signatures required)         | r -                                   |
| Name of owner: QRPG Realty Corporation & Canadian Core Real Estate LP   |                                       |
| Address for service: 145 King Street West, Suite 1801, Toronto, ON M5H 1J8  |                                       |
| Name of contractor: CAMPBELL & KENNEDY ELECTRIC (1996) LIMITED  |                                       |
| Address for service: 11-242 Applewood Crescent, Concord, ON L4K 4E5   |                                       |
| Name of payment certifier (where applicable): Smith + Andersen  |                                       |
| Address: 1100-100 Sheppard Avenue East, Toronto, ON M2N 6N5   |                                       |
| (Use A or B, whichever is appropriate)  |                                       |
| A. Identification of premises for preservation of liens:  |                                       |
| (if a lien attaches to the premises, a legal description of the premises, including all property identifier numbers and addresses for the premises) |                                       |
| B. Office to which claim for lien must be given to preserve lien:   |                                       |
| 145 King Street West, Suite 1801, Toronto, ON M5H 1J8   |                                       |
| (if the lien does not attach to the premises, the name and address of the person or body to whom the claim for lien must be give                    | /en)                                  |