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

Construction Act

TORDATO (County/District/Regional Municipality/Town/City in which premises are situated) 1221 KING ST 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. HVAC / VENTLESSON / CHUTES / DUCTWORK (short description of the implovement) to the above premises was substantially performed on Nov 21, 2023 (date substantially performed) Date certificate signed: NOV 29, 2023 owner and contractor, where there is no payment certifier) (payment certifier where there is one) to RESIDENCES WC. Name of owner: SI JACKES AVENUE SUITE 300, TORONTO MUTIEZ Address for service: TITAN MOCHANICAE INC. Name of contractor: 550 PIERCEY RO, BOLTON, CE LTE 5134 Address for service: Name of payment certifier (where applicable) Address (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: LIFETIME DEVEROPMENTS SI JACLO (if the lien does not attach to the premises, a concise description) X TOLDATO and the name and address of the person or body to whom the claim for lien must be given) MYTIE2

CA-9-E (2019/01)