CERTIFICATE OF SUBSTANTIAL PERFORMANCE OF THE CONTRACT UNDER SECTION 32 OF THE ACT Construction Act

| City of Toronto | |
|---|--|
| (County/District/F | egional Municipality |
| 1867 Yonge Street Co. | Regional Municipality/Town/City in which premises are situated) |
| 5 officer, builte 1004. Foronto | Ontario Mag due |
| dadioss and city, to | own, etc., or, if there is no street address, the location of the |
| This is to certify that the contract for the fo | Mension is a second of the premises) |
| s and definition the lo | illowing improvement: |
| Midtown Eye Care Interior Renovation | |
| 1 | (short description of the improvement) |
| to the above premises was substantially | , and improvement) |
| to the above premises was substantially pe | erformed on February 24, 2023 |
| Dete | (date substantially performed) |
| Date certificate signed: March 15, 2023 | |
| | |
| | |
| (payment certifier where there is one | (Outpox and a six and a si |
| Dr. Marcovitch & Dr. Mo | iselykina (owner and contractor, where there is no payment certifier) |
| Name of owner: Corporation | |
| | |
| Address for service: 1867 Yonge Street, S | tuito 1004 Towards On one |
| | |
| Name of contractor: BMK Benchmark Inc. | |
| Address for service: 20 Bozon Book III | |
| Address for service: 20 Regan Road, Unit | 14, Brampton, Ontario |
| Name of payment certifier (where applicable | N/A |
| | J. IVA |
| Address: | |
| Use A or B, whichever is appropriate) | |
| whichever is appropriate) | |
| A. Identification of premises for pres | servation of lionar |
| 1867 Yonge Street Suito 1004 | Civation of liefs. |
| 1867 Yonge Street, Suite 1004, | attaches to the pression |
| including a | attaches to the premises, a legal description of the premises, all property identifier numbers and addresses for the premises) |
| B. Office to which claim for " | and dedicases for the premises) |
| B. Office to which claim for lien must | be given to preserve lien: |
| | |
| (If the lien does not attach to the premi | ses, the name and address of the person or body to whom the claim for lien must be given) |
| | (all the state of the first be given) |