BMO Bank of Montreal

Fields indicated by an asterisk (*) are optional and completed where applicable

Dated as of: 22SEP2020

AGREEMENT FOR BUSINESS BANKING: EXECUTION AND ACCOUNT INFORMATION

*Please read this document carefully - it applies to all Account(s) of the Customer (as defined in Part A) with Bank of Montreal (the **"Bank"**). Capitalized terms used herein will have the meanings ascribed to them in the Bank's Agreement for Business Banking (as amended, substituted or replaced from time to time the **"ABB"**) unless otherwise defined below. This Agreement, once Part E has been signed by/on behalf of the Customer, forms part of the ABB between the Customer and the Bank (together, the **"Agreement"**).*

PART A: PARTICULARS OF BUSINESS ACCOUNTS

Account# 1 — Transit: 0004 — AccountNumber: 1677-237

Account# 2 — Transit: 0004 — AccountNumber: 8630-693

Legal Name: 2323442 ONTARIO INC. (the "**Customer**")

Trade Name* (Operating As or additional name information for joint business accounts only)

C/O or ATTN.*

Business Address

Street Number: 567 — Street Name: HORNBY ST — Apt./Suite *: 1511

City: VANCOUVER — Prov/State: BRITISH COLUMBIA — Postal/Zip Code: V6C2E8

Country (if other than Canada)

Business Telephone No. *: (236)333-5419 — Fax No. *

Business Type (e.g. Sole Proprietorship): Corporation - Privately Owned - Provincial

(Federal) Business Number* (required for interest-bearing accounts)

Nature of Business: Service Industries - Other Services n.c.e.

THIRD PARTY DETERMINATION

1677-237

Is this account a trust account or are these trust accounts, being opened by you in your capacity as a lawyer, accountant, or real estate broker or real estate sales representative on behalf of your customer(s)? — Yes ☐ No ☒ **If Yes, proceed directly to "Authorized Signatory and Identification" section**

Will this deposit account or these deposit accounts only be used by your business and only for your business transactions, or only to administer trust funds? — Yes ☒ No ☐ **If No, Complete Third Party Determination Form 3391**

8630-693

Is this account a trust account or are these trust accounts, being opened by you in your capacity as a lawyer, accountant, or real estate broker or real estate sales representative on behalf of your customer(s)? — Yes ☐ No ☒ **If Yes, proceed directly to "Authorized Signatory and Identification" section**

Will this deposit account or these deposit accounts only be used by your business and only for your business transactions, or only to administer trust funds? — Yes ☒ No ☐ **If No, Complete Third Party Determination Form 3391**

AUTHORIZED SIGNATORY AND IDENTIFICATION

Authorized Signatory 1

Name: MR KIRILL SHAMRAI

(Company) Position e.g. Treasurer*: OWNER

Authorized Signatory 2

Name: MR EVGUENI SKRIBOVSKI

(Company) Position e.g. Treasurer*: AUTHORIZED SIGNATORY

Authorized Signatory 3

Name:

(Company) Position e.g. Treasurer*: