#### Parkside Village - Block 9 - South

#### AMENDMENT TO AGREEMENT OF PURCHASE AND SALE

AMACON DEVELOPMENT (CITY CENTRE) CORP. (the "Vendor") and

#### VICTOR CHOW and VIVIAN YUET-MEI CHOW (the "Purchaser")

Suite 2720 Tower 9 South Unit 19 Level 26 (the "Unit")

It is hereby understood and agreed between the Vendor and the Purchaser that the following change(s) shall be made to the above-mentioned Agreement of Purchase and Sale, and except for such change(s) noted below, all other terms and conditions of the Agreement shall remain as stated therein, and time shall continue to be of the essence.

#### DELETE: FROM THE AGREEMENT OF PURCHASE AND SALE

#### **INSERT: TO THE AGREEMENT OF PURCHASE AND SALE**

The undersigned, VIZIN CHE - SIN CHOW (collectively, the "Purchaser")

DATE OF BIRTH: 1990/08/28

DRIVER'S LICENCE: C3627-77429-05828

SIN No.

CURRENT ADDRESS: 1107-4065 BRICKSTONE MEWS, MISSISSAUGA, ON, L5B 0G3

TELEPHONE: 647-784-0179 EMAIL: v.chow27@gmail.com

OCCUPATION: LCA

**EMPLOYER: CANADA POST** 

(Relationship to original purchaser: DAUGHTER)

Signature:

The undersigned, JONATHAN BOYLE (collectively, the "Purchaser")

DATE OF BIRTH: 1986/11/22

DRIVER'S LICENCE: B6917-40908-61122

SIN No:

CURRENT ADDRESS: 1107-4065 BRICKSTONE MEWS, MISSISSAUGA, ON, L5B 0G3

TELEPHONE: 416-821-3103 EMAIL: jonathan.boyle@gmail.com OCCUPATION: LIFEGUARD EMPLOYER: CITY OF MISSISSAUGA

(Relationship to original purchaser: SON IN LAW)

Signature:

D

ated at Mississauga, Ontario this 👱	_ day of	August	2018.
SIGNED, SEALED AND DELIVERED In the Presence of:			
Witness Witness Witness		Purchaser - VIVIAN YUI	

2018.

c/s

AMAÇON DEVELOPMENT (QITY CENTRE) CORP.

Per: Authorized Signing Officer

I have the authority to bind the Corporation.



395 2720

Phone: 416821 3103

C-meil : Jonathan Boyle@gmail

Occupation: Lifegrard

Employer: City of mississauga

deletionship to original purchaser; mother father in law



BSS 2720

Phone: 697 789 0779

e-moil: V. Chow 27 Egmail. com

Employer: Canada Post Decupation: CCA Relietionship to original purchaser: Daughter

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uring an analysis to	A.1, A.2. or A.3 must be completed for your individual clients or unrepresented individuals that are not clients, but are parties to the transaction larger or seller). Where you are unable to identify an unrepresented individual, complete section A.4 and consider sending a Suspicious idealary to verify the Identity of an individual, see procedure described in CREA's materials on REALTOR Link®.
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A.4 Unrepresentation Page	and all
A.4 Unrepresented Individual Reasonable Measures Record (if appl)  1. Measures taken to Ascertain Identity of an unrepresented individual Asked unrepresented individual Check one):	ra
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Asked unrepresented individual for information to ascertain their identity      Other, explain:	· · · · · · · · · · · · · · · · · · ·
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B. Verification of Third Parties	*******
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B. Verification of Third Parties  NOTE: Only complete Section B for your clients, Complete to the section of the section because the section of the section because the section of the section because the sec	***************************************
NOTE: Only complete Section B for your clients. Complete this section of the form to indicate party. Either B.1 or B.2 must be completed.  B.1 Third Party Reasonable Measures Where you cannot determine whether there is a third party, complete this section being seen.	
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Measures taken (check one):	terreck one):
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5. Relationship between third party and client:	
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5. Incorporation number and place of Issue (if applicable): 6. Relationship between third party and client:	
5. Incorporation number and place of Issue (if applicable): 6. Relationship between third party and client:	





NOTE: Only complete Sections C and D for your clients.

## C. Client Risk (ask your Compliance Officer if this section is applicable)

Determine the level of risk of a money laundering or terrorist financing offence for this client by determining the appropriate cluster of client in your policles and procedures manual this client falls into and checking one of the checkboxes below:

Low Risk		e of the checkboxes below:	ing the appropriate cluster of client in
Canadian Citizen or Re	esident Physically Present		
Manufacturen or Ri	scirlant Marian		
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☐ Foreign Citizen or Res	esident Not Physically Present esident – High Crime Area – No Oth ident that does not Operate in a High	er Higher Risk Factors Evide	eni
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High Risk			
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Other, explain:	Resident that operates in a High Ris	k Country (physically press	21
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If you determined that the client's risk was high, tell your brokerage's Compliance Officer. They will want to consider this when conducting the overall brokerage risk assessment, which occurs every two years. It will also be relevant in completing Section will need to provide a risk assessment of the client, and explain their assessment, in the relevant space above.





	on Information Record
D. Business Relationship fask your Compliance Officer wh	
D.1. Purpose and Intended Nat Check the appropriate boxes.  Acting as an agent for the purchase or sal Residential property  Commercial property  Other, please specify:	ture of the Business Relationship
D.2. Measures Taken to Monit D.2.1. Ask the Client if their name, address information on page one.	tor Business Relationship and Keep Client Information Up-To-Date as or principal business or occupation has changed and if it has include the updated with the client on file in order to maintain a record of the information you have used to monitor Optional - if you have taken measures beyond simply keeping correspondence on file, specify
D.2.3. If the client is high risk you must client information up to date. Optional -	conduct enhanced measures to monitor the brokerage's business relationship and keep their consult your Compliance Officer and document what enhanced measures you have applied:

#### **D.3 Suspicious Transactions**

Don't forget, if you see something suspicious during the transaction report it to your Compliance Officer. Consult your policies and procedures manual for more information.



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is recommended that the Individual Identification Information Record be complete  (i) for a buyer when the offer is submitted and/or a described to the purchase.	or sale of real estate.
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*See CREA's FINITAGE	
*See CREA's FINTRAC materials on REALTOR Link® for examples. ** O	or reference number if there is no account number.  Estate Association to assist members in complying with requirements dering) and Terrorist Financing Regulations © 2014-2017.
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Only complete this section when you are unable to ascertain the identity of an unrepresented individual.  S. Asked unrepresented individual individual.  D. Other.	ď
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☐ Asked unrepresented individual for information to ascertain their identity	52 CX 243 ,
Asked unrepresented individual for information to ascertain their identity  Dother, explain:  B. Verification of Third Parties  NOTE: Only complete Section B for your clients, Complete to B. 2 must be correct.	
- reinication of Third -	*********
Note: a	*********
NOTE: Only complete Section B for your clients. Complete this section of the form to indicate party. Either B.1 or B.2 must be completed.  B.1 Third Party Reasonable Measures Where you cannot determine whether there is a third party, complete this	
Party. Either B.1 or B.2 must be for your clients Comme	
De completed. Completed this section of the fa	
5.1 Third Party Da	What
Where you cannot determine as onable Manager	wildlier a client is acting and
Is the second whether there is a state of the second secon	on behalf of a third
Where you cannot determine whether there is a third party, complete this section.  Yes	a till (
Yes Yes This section.	
No No	
Is the transaction being conducted on behalf of a third party according to the citent  Yes  No  Measures taken (check one).	12 (nh-
Measures taken (check one):	(check one):
Asked if client	
Other, explain was acting on behalf	j
Asked if client was acting on behalf of a third party  Other, explain:  Date on which above measures taken:  Reason why measures were unsuccessful (check one):  Other, explain:  Indicate whether there are any other.	<b>&gt;</b>
above measures total	
Reason why	
Client did Were Unsure	**********
Other own of provide information (check one)	*******
least explain:	
ilidicate whether there	
No No are are any other ground	
Client did not provide information  Other, explain:  Indicate whether there are any other grounds to suspect a third party (check one):  Yes, explain:  B.2 Third Party Record  Where there is a third party, complete this section	********
party (check one)	
B.2 Third p	and the engage of
B.2 Third Party Record  Where there is a third party	
more is a third party, complete at	****
Where there is a third party, complete this section.  1. Name of third party.	
Contract to the contract to th	
1. Name of third party: 2. Address: 3. Date of Birth: 4. Nature of Principal Business or Occupation: 5. Incorporation number of third party.	
4. Nature of Prince	** Exercise
Incipal Business or Occasional	60 Fr 10 Fr
5. Incorporation:	construction of the contract o
1. Name of third party: 2. Address: 3. Date of Birth: 4. Nature of Principal Business or Occupation: 5. Incorporation number and place of Issue (if applicable): 6. Relationship between third party and client:	· · · · · · · · · · · · · · · · · · ·
6. Relationship to	And the second s
between third party	
Party and client:	The state of the s
the state of the s	and the second s
5. Incorporation number and place of Issue (if applicable): 6. Relationship between third party and client:	the same and the s
The state of the s	- Total 2012





NOTE: Only complete Sections C and D for your clients.

## C. Client Risk (ask your Compliance Officer if this section is applicable)

Determine the level of risk of a money laundering or terrorist financing offence for this client by determining the appropriate cluster of client in your policies and procedures manual this client falls into and checking one of the checkboxes below:

□ Canadian Citizen or Resident Not Physically Present □ Canadian Citizen or Resident - High Crime Area - No Other Higher Risk Factors Evident □ Foreign Citizen or Resident that does not Operate in a High Disk of	
☐ Foreign Citizen or Resident that december 7.	1
☐ Foreign Citizen or Resident that does not Operate in a High Risk Country (physically pr ☐ Other, explain:	esent or now
	of flot
	r.
Medium Risk	
□ Explain:	
	3
*	
High Dir.	
High Risk	
D Other coulting	
□ Foreign Citizen or Resident that operates in a High Risk Country (physically present □ Other, explain:	or not)
* :	

If you determined that the client's risk was high, tell your brokerage's Compliance Officer. They will want to consider this when conducting the overall brokerage risk assessment, which occurs every two years. It will also be relevant in completing Section will need to provide a risk assessment of the client, and explain their assessment, in the relevant space above.





Business Relational:	on Information Record
k your Compliance Office	THE OTHER PROPERTY.
k your Compliance Officer who	en this section is applicable)
1. Purpose and I-4-	
eck the appropriate intended Nati	ure of the Business Relationship
ting as an account of the same as a same a	relationship
ting as an agent for the purchase or sale	e of:
Residential property	□ Residential account
Commercial property	Residential property for income purposes
U Other, please specify:	□ Land for Commercial Use
2 30	☐ Land for Commercial Use
-2. IVIEZSIII'DE Tale	The state of the s
.2.1. Ask the Client if their name address	or Business Relationship and Keep Client Ind
.2.1. Ask the Client if their name, address formation on page one.	or Business Relationship and Keep Client Information Up-To-Date
.2.1. Ask the Client if their name, address formation on page one.	or Business Relationship and Keep Client Information Up-To-Date s or principal business or occupation has changed and if it has include the updated
.2.1. Ask the Client if their name, address formation on page one. 2.2.2 Keep all relevant correspondence when the client is the client.	or Business Relationship and Keep Client Information Up-To-Date s or principal business or occupation has changed and if it has include the updated with the client on file in order to maintain a record of the continuous statement of the continuous statement.
.2.1. Ask the Client if their name, address formation on page one. 2.2.2 Keep all relevant correspondence we business relationship with the client. If the client is the client.	or Business Relationship and Keep Client Information Up-To-Date s or principal business or occupation has changed and if it has include the updated with the client on file in order to maintain a record of the information you have used to mosite.  Optional - if you have taken measures beyond simply keeping assured.
.2.1. Ask the Client if their name, address formation on page one.  2.2.2 Keep all relevant correspondence we business relationship with the client. If the page is the page in the page is the page is the page in the page is the page i	or Business Relationship and Keep Client Information Up-To-Date is or principal business or occupation has changed and if it has include the updated with the client on file in order to maintain a record of the information you have used to monitor Optional - if you have taken measures beyond simply keeping correspondence on file, specification.
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#### D.3 Suspicious Transactions

Don't forget, if you see something suspicious during the transaction report it to your Compliance Officer. Consult your policies and procedures manual for more information.



