

GUIDE TO COMPLETING THE PROOF OF CLAIM

This Guide has been prepared to assist Creditors in filling out the Proof of Claim with respect to the Applicants. If you have any additional questions regarding completion of the Proof of Claim, please consult the Monitor's website at www.ey.com/ca/agmedica or contact the Monitor, whose contact information is shown below.

Additional copies of the Proof of Claim form may be found at the Monitor's website address noted above.

Please note that this is a guide only, and that, in the event of any inconsistency between the terms of this guide and the terms of the Claims Procedure Order made on February 4, 2020, the terms of the Claims Procedure Order will govern.

Section A – Original Creditor

- A separate Proof of Claim form must be filed by each person asserting a claim against any Applicant listed in Section C.
- The Creditor shall include any and all Claims it asserts against any Applicant in a single Proof of Claim.
- The full legal name of the Creditor must be provided.
- If the Creditor uses a different name or names, please indicate this in a separate schedule in the supporting documentation.
- All future correspondence, notices, etc. regarding the Claim will be directed to the address and contact indicated in this section.

The following is a list of Applicant companies against whom a claim may be asserted in this claims process. Indicate on the form the name of the Applicant by ticking the appropriate box(es):

- AGMEDICA BIOSCIENCE INC.,
- 2472602 ONTARIO INC.,
- 2642466 ONTARIO INC.,
- 8895309 CANADA INC.,
- WELLWORTH HEALTH CORP.,
- 8050678 CANADA INC.,
- 8326851 CANADA INC.,
- TAVIVAT NATURALS INC.,
- WORLDWIDE BEVERAGE INNOVATIONS INC.,
- UNIQUE BEVERAGES (USA) INC., and
- ESEELA INC.

Section B – Assignee

- Only complete this section if the claim has been assigned by the Original Creditor to a third party.
- Assignment documentation must be provided along with the Proof of Claim form.

Section C – Amount of Claim of Creditor against Applicant

- Indicate the amount the Applicant / Officer(s) or Director(s) was, and still is, indebted to the Creditor Currency, Original Currency Amount.
- The amount of the Claim must be provided in the currency in which it arose.
- Indicate the appropriate currency in the Currency column.
- If the Claim is denominated in multiple currencies, use a separate line to indicate the Claim amount in each such currency. If there are insufficient lines to record these amounts, attach a separate schedule indicating the required information.
- You will only have a restructuring claim if you incurred a liability because of the restructuring, termination, repudiation or disclaimer of any lease, contract, or other agreement on or after December 2, 2019.

Section D – Nature of Claim

- The total claim amount as indicated in section D should be separated into the portion that is unsecured and secured.

Secured

- Check the Secured box ONLY if the Claim recorded on that line is secured. Do not check this box if your Claim is unsecured. NOTE: Most Claims in general are unsecured claims.
- If the value of the collateral securing your Claim is less than the amount of your Claim, enter the shortfall portion on a separate line as an unsecured claim.
- Evidence supporting the security you hold must be submitted with the Proof of Claim form. Provide full particulars of the nature of the security, including the date on which the security was given and the value you attribute to the collateral securing your Claim. Attach a copy of all related security documents.

Officers and Directors

- Check this box only if the Claim you are making is also being asserted against a current or former officer or director of the Applicant.
- You must identify the individual officer(s) or director(s) against whom you are asserting the Claim in Section C.

Section E – Documentation

- Attach to the claim form all particulars of the Claim and supporting documentation, including amount, description of transaction(s) or agreement(s) giving rise to the Claim and name of any guarantor which has guaranteed the Claim.

Section F – Filing of Claim

- The person signing the Proof of Claim form should:
 - Have knowledge of all the circumstances connected with this Claim.
 - Be the Creditor, or an Authorized Representative of the Creditor.
- By signing and submitting the Proof of Claim, the Creditor is asserting the claim against the Applicant and / or the indicated officer(s) or director(s).

- This Proof of Claim must be received by the Monitor by no later than **5:00 p.m.** (Eastern Standard Time) on **March 16, 2020**. Proofs of Claim should be sent by prepaid ordinary mail, courier, personal delivery or electronic or digital transmission to the following address:

Ernst & Young Inc.
Court-appointed Monitor of AgMedica Bioscience Inc. & others
100 Adelaide Street, West, PO Box 1
Toronto, ON, M5H 0B3

Telephone: 1-866-220-2247 or 416-941-1872
E-mail: AgMedica.Monitor@ca.ey.com
Fax: 1-416-943-3300

Failure to file your Proof of Claim so that it is received by the Monitor by **5:00 p.m.** (Eastern Standard Time) on the Claims Bar Date of **March 16, 2020** will result in your Claim being barred and you will be prevented from making or enforcing your Claim against the Applicant or any current or former officer or director of any of the Applicants. In addition, you shall not be entitled to further notice in and shall not be entitled to participate as a creditor in these proceedings with respect to your Claim.