

EQUIPMENT LEASE AGREEMENT

Between Polar Dynamics Robotics, Inc. and Arctic Pharma Solutions

THIS EQUIPMENT LEASE AGREEMENT (the "Agreement") is made effective as of February 1, 2024 (the "Effective Date"), by and between:

Polar Dynamics Robotics, Inc., a Delaware corporation with its principal place of business at 4200 Innovation Drive, Cambridge, MA 02142 ("Lessor")

and

Arctic Pharma Solutions, a Massachusetts corporation with its principal place of business at 100 Pharmaceutical Way, Boston, MA 02210 ("Lessee")

1. EQUIPMENT SUBJECT TO LEASE

1 The Lessor hereby leases to Lessee, and Lessee hereby leases from Lessor, the following equipment (collectively, the "Equipment"):

- Three (3) IceNav(TM) AMR-500 Autonomous Mobile Robots
- Two (2) IceNav(TM) Charging Stations (Model CS-200)
- One (1) IceNav(TM) Central Control Unit (Model CCU-2024)
- Associated software licenses and control systems

2 Serial Numbers:

- AMR-500 Units: PDR-2024-0142, PDR-2024-0143, PDR-2024-0144
- Charging Stations: CS-2024-0089, CS-2024-0090
- Control Unit: CCU-2024-0056

2. LEASE TERM AND PAYMENTS

1 Initial Term: Twenty-four (24) months commencing on February 1, 2024, and ending on January 31, 2026.

2 Monthly Lease Payment: \$12,500 USD, payable in advance on the first day of each month.

3 Security Deposit: \$25,000 USD, due upon execution of this Agreement.

3. OPERATING CONDITIONS AND REQUIREMENTS

1 Environmental Specifications:

- Operating temperature range: -30 C to +10 C
- Humidity range: Up to 95% non-condensing
- Clean room classification: ISO 8 compatible

2 Operational Requirements:

- Equipment must be operated within Lessee's GMP-certified pharmaceutical storage facility
- Maximum daily operation: 20 hours per unit
- Minimum charging time: 4 hours per 24-hour cycle
- Regular maintenance intervals as specified in Schedule A

4. MAINTENANCE AND SUPPORT

1 Lessor Responsibilities:

- Quarterly preventive maintenance inspections
- Software updates and patches
- 24/7 emergency technical support
- Replacement of defective components
- Annual recalibration and certification

2 Lessee Responsibilities:

- Daily operational checks and cleaning
- Maintaining operating environment within specifications
- Reporting any malfunctions within 24 hours
- Maintaining access logs and usage records
- Following prescribed charging protocols

5. WARRANTIES AND REPRESENTATIONS

1 Lessor warrants that:

- Equipment meets FDA 21 CFR Part 11 compliance requirements
- All units are factory-new and unused

- Equipment complies with cGMP requirements
- Software is properly licensed and validated
- Maintenance personnel are properly trained and certified

2 Lessee warrants that:

- Facility meets all specified environmental requirements
- Operators will be trained per Lessor's requirements
- Usage will comply with all applicable regulations
- Access to Equipment will be appropriately controlled

6. INSURANCE AND LIABILITY

1 Required Insurance:

- Commercial General Liability: \$5,000,000 per occurrence
- Property Insurance: Full replacement value of Equipment
- Workers' Compensation: As required by law

2 Additional Insured: Lessor shall be named as additional insured on all policies.

7. TERMINATION AND RETURN

1 Early Termination: Requires 90 days written notice and payment of early termination fee equal to three months' lease payments.

2 Return Conditions:

- Equipment must be in original condition, normal wear excepted
- All software and data must be securely wiped
- Professional de-installation required
- Return shipping at Lessee's expense

8. CONFIDENTIALITY

1 All technical specifications, operating parameters, and performance data related to the Equipment shall be treated as Confidential Information per the Master Confidentiality Agreement dated January 15, 2024.

9. GOVERNING LAW

1 This Agreement shall be governed by and construed in accordance with the laws of the Commonwealth of Massachusetts.

IN WITNESS WHEREOF, the parties have executed this Agreement as of the Effective Date.

POLAR DYNAMICS ROBOTICS, INC.

By:

Name: Katherine Wells

Title: Chief Financial Officer

Date:

ARCTIC PHARMA SOLUTIONS

By:

Name:

Title:

Date: