



INVESTOR PRESENTATION · OCTOBER 2026

Smart Solutions for Better Health.

Launchit Solutions builds the platforms behind chronic care, and the healthcare partnerships that drive patient volume.

Concurrent financing with a proposed TSX Venture Exchange listing as Launchit Medical Inc. (LMED) · Confidential

BEFORE YOU READ

Cautionary note

This presentation

This presentation is confidential. It gives general information about Launchit Solutions Inc. to help qualified investors evaluate the company. It is not an offer to sell, or a request to buy, any securities. Any offer is made only under the subscription agreement and applicable securities laws. Do not copy or share this presentation without our written consent.

Market data comes from third-party sources that we have not independently verified. Figures are in Canadian dollars unless stated. Our fiscal year ends February 28.

Forward-looking information

Some statements are forward-looking information under Canadian securities laws. These include our plans, targets, timing, partnerships and the proposed listing. They are based on management's current assumptions and are not guarantees. Actual results may differ materially.

Key risks include our ability to raise capital, execute our plans, keep our partners and key people, regulatory change and competition. Targets in this presentation are management goals, not forecasts. We do not undertake to update them, except as the law requires.

INVESTMENT HIGHLIGHTS

Why Launchit, in five lines

01

We solve the problem the drug does not.

Most GLP-1 patients stop within a year. Our patients reach 95% adherence to treatment.

02

The biggest names in obesity already work with us.

Novo Nordisk, Eli Lilly and Shoppers Drug Mart.

03

Partners bring us the patients.

Pharma, pharmacies and specialists refer patients, so growth does not depend on paid ads alone.

04

One platform, many conditions.

Sleep apnea went live on October 1, 2026. Psoriatic disease, Québec pharmacy and longevity licensing are next.

05

A clear entry point.

Up to C\$5M at C\$0.50 per unit, with a proposed listing on the TSX Venture Exchange.

WHY NOW

Three shifts move the value from the drug to the patient who stays on it



Demand is consumer-driven

Patients now ask for GLP-1 drugs by name. Employer plans that cover them for weight loss grew from 17% in 2024 to 37% in 2026.



Drugs cost less and do more

Generic semaglutide arrived in Canada in April 2026. In June 2026, tirzepatide gained a sleep apnea indication.



Prescribers cannot absorb it

Family doctors and specialists have no time, billing code or protocol for months of titration and follow-up.

More patients start treatment. Few have a team that keeps them on it. That gap is our market.

THE PROBLEM

Most patients stop treatment within a year

50–75%

of GLP-1 users stop the drug within 12 months.

Weight-loss patients quit more often than diabetes patients:
64.8% against 46.5% in one study.

Pharma loses revenue

Every stop ends a prescription the manufacturer paid to start.

Pharmacies lose refills

A patient who stops at month three fills a fraction of the scripts.

Patients lose the outcome

Obesity is a chronic, relapsing disease. Weight returns when treatment stops.

OUR ANSWER

One operating system for chronic care

MWM, our virtual obesity clinic, runs on it. Physicians, nurses, registered dietitians and administrators work in one record, one schedule and one patient roadmap.

95%

adherence to treatment, against
30–50% in standard care

20.8 lb

average weight loss in the first
six months

Technology

Clinic tools, patient records, admin portal, mobile app and sign-up site on one database.

Clinical protocol

Built on Canada's Adult Obesity Clinical Practice Guidelines, by two of their authors.

Care team

Fractional physicians and registered dietitians, licensed across provinces.

Partnerships

Pharma, pharmacies and specialists who send patients to us.

PROOF OF DISTRIBUTION

Obesity's biggest names already work with us



Pharma · Support programs

Novo Nordisk

We run patient support programs for Ozempic and Wegovy: savings cards, education and reimbursement navigation.

195,000+

patients enrolled across the two programs



Pharma · Referral

Eli Lilly

MWM is a recommended obesity provider on lilly.ca and zepbound.ca. Lilly introduced our sleep apnea partner and asked us to run a psoriatic disease pilot.

2

new programs started with Lilly in 2026



Pharmacy · Licence

Shoppers Drug Mart

Licenses a pharmacy-led version of our obesity program, offered at no charge to patients.

1,800+

pharmacy locations across Canada

BUSINESS MODEL

Four types of customer pay us

Who pays
Pharma manufacturers
Pharmacy chains
Patients and benefit plans
Healthcare companies and clinics

We do not own the drug or the pharmacy. We are paid when patients start treatment and stay on it.

UNIT ECONOMICS

Adherence is the economic engine

6x

return on ad spend

Direct-to-consumer marketing for MWM, at a 60% gross margin.

3–4x

more prescription fills

A patient who stays 11 months fills three to four times more than one who stops at month three.

4 hrs

is a full physician shift

Fractional clinicians let us open a province without building a clinic.

Reconfigured three times: pharma support programs (OzempicCare, WegovyCare), retail pharmacy and cardiometabolic care. The clinical content changes. The operating system does not.

DEFENSIBILITY

Four things are hard to copy



Clinical authority

Dr. David Macklin and Dr. Megha Poddar are co-authors of Canada's Adult Obesity Clinical Practice Guidelines. Our protocol is built on their chapters, with published outcomes.



An operating system, not an app

One record, one roadmap and fractional clinicians. Built in-house by a healthcare software team working since 2010, on compliant Canadian hosting.



Distribution we did not buy

Lilly, Novo Nordisk, Shoppers Drug Mart and specialist partners send us patients. These relationships took years to earn.



Drug-agnostic and compliant

Generics and new molecules need the same support, so lower drug prices grow our market. Public, private and pharma funding never mix.

REPEATABLE GROWTH

Same playbook, new clinical doors

Sleep apnea	Shared care with the Sleep Endoscopy Centre. Their patients are referred to MWM, and we screen our patients for sleep apnea.	Live · Oct 1, 2026
Psoriatic disease	Lilly asked us to partner on a pilot for patients with psoriatic disease who also need obesity care, targeting a national rollout in 2026.	Requested by Lilly
Longevity & Aging	Created Precision Aging Institute and launched our Halcyon platform.	Just launched
Québec pharmacy	A pharmacy-led obesity program for a major Québec chain. Pharmacist scope widens on December 9, 2026.	Proposal
Primary and specialty care	Shared care with family doctors and specialists.	In outreach
Next indications	ADHD, menopause and Alzheimer's virtual clinics with pharma partners.	In development

FINANCIALS

Financial snapshot

Revenue today comes from four lines: pharmaceutical services, patient programs, software development, and hosting.

REVENUE, FEB 28, 2026 FY

\$5.13 M

GROSS MARGIN

58%

NEXT YEAR REVENUE TARGET

\$15 M

FINANCING TARGET

\$5 M

DEBT REPAYMENT – 12 MONTHS

\$1.5 m

GROWTH CAPITAL

\$3.5 M

Figures are in Canadian Dollars.

LEADERSHIP

Management, board and medical advisors

Board of directors



Jamie Harsevoort

Chairman and CEO



Justin Leushner

Chief Business Officer



Michael Cloutier

Former President and CEO of 6 major pharma companies & Diabetes Canada.



Bruno Maruzzo

25+ years as venture capitalist, director and investor.



Frank Naus

30 years in clinical trials, research and operations.

Management

Jamie Harsevoort

Chairman and CEO

Regina Lara Yunes

Chief Financial Officer

Justin Leushner

Chief Business Officer

Karl Ludwig

Chief Operating Officer

Medical advisors

Dr. David Macklin

GP and psychotherapist. Co-author of the behavioural treatment chapter of Canada's obesity guidelines. Medical Director, Medcan weight management.

Dr. Megha Poddar

Endocrinologist. Co-author of the assessment chapter of Canada's obesity guidelines. Founder, LMC weight management program.

THE OFFERING

Terms of the financing

Issuer	Launchit Solutions Inc. Resulting issuer: Launchit Medical Inc. (proposed TSXV: LMED)
Offering size	Up to C\$5,000,000
Security	Subscription receipts. Each converts into one unit when the reverse takeover closes.
Issue price	C\$0.50 per subscription receipt
Unit	One common share and one common share purchase warrant
Warrant	Exercise price C\$0.80, for 24 months from closing
Warrant acceleration	If the 20-day VWAP is above C\$1.20, the expiry can move forward, with at least 30 days' notice
Structure	Non-brokered private placement. Funds held in escrow until release conditions are met.
Implied pre-money value	C\$22.5M (45M existing shares at C\$0.50)

Summary only. A term sheet and subscription agreement are available.

ALIGNMENT

Insiders own 75% of Launchit before the financing



75%

held by the CEO and insiders before the financing

Management is invested alongside you.

Our return comes from the share price, the same way yours does.



Smart Solutions for Better Health.

Keeping patients on the therapies that work, and building a company that does what it says.

Jamie Harsevoort

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