Form 45-106F1 Report of Exempt Distribution

ITEM 1 – REPORT TYPE

New report

Amended report

If amended, provide filing date of report that is being amended. 2024 06 26 (YYYY-MM-DD)

ITEM 2 – PARTY CERTIFYING THE REPORT

Indicate the party certifying the report (select only one). For guidance regarding whether an issuer is an investment fund, refer to section 1.1 of National Instrument 81-106 Investment Fund Continuous Disclosure and the companion policy to NI 81-106 (in Québec, Regulation 81-106 respecting Investment Fund Continuous Disclosure and Policy Statement to Regulation 81-106 respecting Investment Fund Continuous Disclosure and Policy Statement to Regulation 81-106 respecting Investment Fund Continuous Disclosure and Policy Statement to Regulation 81-106 respecting Investment Fund Continuous Disclosure and Policy Statement to Regulation 81-106 respecting Investment Fund Continuous Disclosure and Policy Statement to Regulation 81-106 respecting Investment Fund Continuous Disclosure and Policy Statement to Regulation 81-106 respecting Investment Fund Continuous Disclosure and Policy Statement to Regulation 81-106 respecting Investment Fund Continuous Disclosure and Policy Statement to Regulation 81-106 respecting Investment Fund Continuous Disclosure and Policy Statement Fund Continuous Disclosure).

Investment fund issuer

✓ Issuer (other than an investment fund)

Underwriter

ITEM 3 - ISSUER NAME AND OTHER IDENTIFIERS

Provide the following information about the issuer, or if the issuer is an investment fund, about the fund.

identifier".
named

ITEM 4 – UNDERWRITER INFORMATION If an underwriter is completing the report, provide the underwriter's full legal name, firm NRD number, and SEDAR+ profile number. Full legal name Firm NRD number (if applicable)

ITEM 5 – ISSUER INFORMATION
If the issuer is an investment fund, do not complete Item 5. Proceed to Item 6.
a) Primary industry
Provide the issuer's North American Industry Classification Standard (NAICS) code (6 digits only) that in your reasonable judgment most closely corresponds to the issuer's primary business activity.
NAICS industry code 518210
If the issuer is in the mining industry , indicate the stage of operations. This does not apply to issuers that provide services to issuers operating in the mining industry. Select the category that best describes the issuer's stage of operations.
Exploration Development Production Is the issuer's primary business to invest all or substantially all of its assets in any of the following? If yes, select all that apply.
Mortgages Real estate Commercial/business debt Consumer debt Private companies
b) Number of employees
Number of employees: 🗹 0 - 49 🗌 50 - 99 🗌 100 - 499 🗌 500 or more
c) SEDAR+ profile number
Provide the issuer's SEDAR+ profile number

ITEM 6 – INVESTMENT FUND ISSUER INFORMATION

If the issuer is an investment fund, provide the following inform	nation.
a) Investment fund manager information	
Full legal name	
Firm NRD number	(if applicable)
SEDAR+ profile number	
b) Type of investment fund	
Type of investment fund that most accurately identifies the issuer (s	elect only one).
Money market Equity F	ixed income 🔲 Balanced

Alternative strategies	Cryptoasset	Other (describe)		
Indicate whether one or both of th	e following apply to the ir	nvestment fund.		
Invest primarily in other inve		,		
☐ Is a UCITs Fund ¹ ¹ Undertaking for the Collective Investment that allow collective investment schemes in	nt of Transferable Securities fu			
c) Net asset value (NAV)) of the investment fu	und		
Select the NAV range of the investn	nent fund as of the date o	f the most recent NAV calc	ulation (Canaa	lian \$).
🗌 Under \$5M	S5M to under \$	525M 🗌 \$25M to und	er \$100M	Date of NAV calculation:
S100M to under \$500M \$500M	🗌 \$500M to unde	r \$1B 🗌 \$1B or over		YYYY MM DD
ITEM 7 – INFORMATION	ABOUT THE DIST	RIBUTION		
If an issuer located outside of Cano information about purchasers resi commissions or finder's fees, in co Item 7 must reconcile with the info	ident in that jurisdiction o nnection with the distribu	f Canada only. Do not incl ition, which must be disclo	ude in Item 7 s	ecurities issued as payment of
a) Currency				
Select the currency or currencies ir dollars.	ו which the distribution w	as made. All dollar amour	nts provided in	the report must be in Canadian
🗹 Canadian dollar 🛛 US d	dollar 🗌 Euro O	ther (describe)		
b) Distribution dates				
State the distribution start and end the distribution date as both the st include the start and end dates for	tart and end dates. If the	report is being filed for sec		
Start date 202		End date		06 12
YYY	Y MM DD		YYYY	MM DD
c) Detailed purchaser ir	nformation			
Complete Schedule 1 of this form	n for each purchaser an	d attach the schedule to	the complete	d report.
d) Types of securities d	istributed			
Provide the following information , to indicate the security code. If pro distributed.				

								Canadian \$	nadian \$		
Security code	CUSI numbe applica	er (if Description of security			Number securitie		Single or lowest price	Highest price	Total amoun		
UBS		mm	Each unit is comprised of one co mmon share and one common sh are purchase warrant.			20,000,000	000.0000 0.0200)	400,000.000	
f any right	ts (e.g. wa	arrants, op	tions) were di	stributed, p	provide the			piry date for eac			
convertible	e/exchan		urity.		provide the	conversion ra	tio and	describe any oti	ner terms for	each	
Converti exchange security	eable	Underlyir security co	ng (Cana ode	se price dian \$) Highest		e (YYYY-MM- DD)	Conve	ersion ratio		her terms (if cable)	
WNT	г	CMS	0.0500	-	2026	-06-12		1:1			
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³"Net proceeds" means the gross proceeds realized in the jurisdiction from the distributions for which the report is being filed, less the gross redemptions that occurred during the distribution period covered by the report.

ITEM 8 – COMPENSATION INFORMATION

	in NI 45-106) (in Québec, Regulation 45-106 respecting Prospectus Exemptions) to e, any compensation in connection with the distribution. Complete additional vas, or will be, compensated.
	r will be paid, in connection with the distribution. of persons compensated.
a) Name of person compensated a	nd registration status
Indicate whether the person compensated is a re No Yes If the person compensated is an individual, prov	-
Full legal name of individual	
_{Fa} اf the person compensated is not an individual, ا	mily name First given name Secondary given names or ovide the following information.
Full legal name of non-individual	
Firm NRD number	(if applicable)
Indicate whether the person compensated facilit	ated the distribution through a funding portal or an internet-based portal
🗌 No 🔄 Yes	
b) Business contact information	
lf a firm NRD number is not provided in Item 8(c), provide the business contact information of the person being compensated.
Street address	
Municipality	Province/State
Country	Postal code/Zip code
Email address	Telephone number
c) Relationship to issuer or investn	nent fund manager
Indicate the person's relationship with the issuer	or investment fund manager (select all that apply). Refer to the meaning of ne meaning of 'control' in section 1.4 of NI 45-106 (in Québec, Regulation 45-106
Connected with the issuer or investment	fund manager
Insider of the issuer (other than an invest	
Director or officer of the investment fund	-
Employee of the issuer or investment fun	d manager
None of the above	
d) Compensation details	

Provide details of all compensation paid, or to be paid, to the person identified in Item 8(a) in connection with the distribution. Provide all amounts in Canadian dollars. Include cash commissions, securities-based compensation, gifts, discounts or other compensation. Do not report payments for services incidental to the distribution, such as clerical, printing, legal or accounting services. An issuer is not required to ask for details about, or report on, internal allocation arrangements with the directors, officers or employees of a non-individual compensated by the issuer.

Cash commissions paid				
Value of all securities distributed as compensation ⁴				
Security codes	Security code 1	Security code 2	Security code 3	
Describe terms of warrants, options or other rights]
Other compensation ⁵				
Describe				
Total compensation paid				
Check box if the person will or may receive any def	erred compensati	on (describe the te	erms below)	
⁴ Provide the aggregate value of all securities distributed as acquire additional securities of the issuer. Indicate the secu options, warrants or other rights exercisable to acquire ad ⁵ Do not include deferred compensation.	urity codes for all s	ecurities distributed		

ITEM 9 – DIRECTORS, EXECUTIVE OFFICERS AND PROMOTERS OF THE ISSUER

Indicate whether the issuer is any of the following (select the one that applies – if more than one applies, select only one).

\checkmark	Reporting	issuer	in a	jurisdiction	of	Canada
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E Foreign public issuer

Wholly owned subsidiary of a reporting issuer in any jurisdiction of Canada ⁶

Provide name of reporting issuer

Wholly owned subsidiary of a foreign public issuer ⁶

Provide name of foreign public issuer

Issuer distributing only eligible foreign securities and the distribution is to permitted clients only ⁷.

If the issuer is at least one of the above, do not complete Item 9(a) - (c). Proceed to Item 10.

⁶ An issuer is a wholly owned subsidiary of a reporting issuer or a foreign public issuer if all of the issuer's outstanding voting securities, other than securities that are required by law to be owned by its directors, are beneficially owned by the reporting issuer or the foreign public issuer, respectively.

⁷ Check this box if it applies to the current distribution even if the issuer made previous distributions of other types of securities to non-permitted clients. Refer to the definitions of "eligible foreign security" and "permitted client" in Part B(1) of the Instructions.

□ If the issuer is none of the above, check this box and complete Item 9(a) – (c).

a) Directors, executive officers and promoters of the issuer

Provide the following information for each director, executive officer and promoter of the issuer. For locations within Canada, state the province or territory, otherwise state the country. For "Relationship to issuer", "D" – Director, "O" – Executive Officer, "P" – Promoter.

Organization or company name	Family name	First given	Secondary given names	Business location of non-individual or residential jurisdiction of individual	Relationship to issuer (select all that apply)			
		name		Province or country	D	0	Р	

b) Promoter information

If the promoter listed above is not an individual, provide the following information for each director and executive officer of the promoter. For locations within Canada, state the province or territory, otherwise state the country. For "Relationship to promoter", "D" – Director, "O" – Executive Officer.

Organization or	Family	First given	, , ,	Residential jurisdiction of individual		promoter (select if applicable)
company name	name	name	names	Province or country	D O	
c) Residential a	ddress of	each indivi	dual			

Complete Schedule 2 of this form providing the full residential address for each individual listed in Item 9(a) and (b) and attach to the completed report. Schedule 2 also requires information to be provided about control persons.

ITEM 10 – CERTIFICATION

Provide the following certification and business contact information of an officer, director or agent of the issuer or underwriter. If the issuer or underwriter is not a company, an individual who performs functions similar to that of a director or officer may certify the report. For example, if the issuer is a trust, the report may be certified by the issuer's trustee. If the issuer is an investment fund, a director or officer of the investment fund manager (or, if the investment fund manager is not a company, an individual who performs similar functions) may certify the report if the director or officer has been authorized to do so by the investment fund.

The certification may be delegated, but only to an agent that has been authorized by an officer or director of the issuer or underwriter to prepare and certify the report on behalf of the issuer or underwriter. If the report is being certified by an agent on behalf of the issuer or underwriter, provide the applicable information for the agent in the boxes below.

If the individual completing and filing the report is different from the individual certifying the report, provide the name and contact details for the individual completing and filing the report in Item 11.

The signature on the report must be in typed form rather than handwritten form. The report may include an electronic signature provided the name of the signatory is also in typed form.

Securities legislation requires an issuer or underwriter that makes a distribution of securities under certain prospectus exemptions

securities regulatory aut	nation below, l certify, on beha hority or regulator, as applical	ble, that I have r	eviewed this re	vestment fund manager, to the port and to my knowledge, hav the extent required, complete	ving
Name of Issuer/ investment fund manager/agent	New World Solutions Inc.				
Full legal name	HABER	Pa	ul		
	Family name	First give	en name	Secondary given names	
Title	Chief Executive Officer				
Telephone number	+1 (416) 318-6501	Email address	phaber@sum	mitbancorp.com]
Signature	/s/ "Paul Haber"	Date	2024	06 25	

ITEM 11 – CONTACT PERSON

Provide the following business contact information for the individual that the securities regulatory authority or regulator may contact with any questions regarding the contents of this report, if different than the individual certifying the report in Item 10.

Same as individual certifying the report

Full legal name	RAHMANI		Shamim		
	Family name		First given name		Secondary given names
Title	Paralegal				
Name of company	BOUGHTON LAW CORPORATI	ION			
Telephone number			Email address	srahn	nani@boughtonlaw.com

NOTICE – COLLECTION AND USE OF PERSONAL INFORMATION

The personal information required under this form is collected on behalf of and used by the securities regulatory authority or regulator under the authority granted in securities legislation for the purposes of the administration and enforcement of the securities legislation. If you have any questions about the collection and use of this information, contact the securities regulatory authority or regulator in the local jurisdiction(s) where the report is filed, at the address(es) listed at the end of this form.

Schedules 1 and 2 may contain personal information of individuals and details of the distribution(s). The information in Schedules 1 and 2 will not be placed on the public file of any securities regulatory authority or regulator. However, freedom of information legislation may require the securities regulatory authority or regulator to make this information available if requested.

By signing this report, the issuer/underwriter confirms that each individual listed in Schedule 1 or 2 of the report who is resident in a jurisdiction of Canada:

- a) has been notified by the issuer/underwriter of the delivery to the securities regulatory authority or regulator of the information pertaining to the individual as set out in Schedule 1 or 2, that this information is being collected by the securities regulatory authority or regulator under the authority granted in securities legislation, that this information is being collected for the purposes of the administration and enforcement of the securities legislation of the local jurisdiction, and of the title, business address and business telephone number of the public official in the local jurisdiction, as set out in this form, who can answer questions about the security regulatory authority's or regulator's indirect collection of the information, and
- b) has authorized the indirect collection of the information by the securities regulatory authority or regulator.