# Form 45-106F1 Report of Exempt Distribution

ITEM 1 – REPORT TYPE									
X New report  Amended report If amended, provide filing date of report that is being amended. (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.  Investment fund issuer  X Issuer (other than an investment fund)  Underwriter									
ITEM 3 - ISSUER NAME AN	ND OTHER IDENT	IFIERS							
Provide the following information about	the issuer, or if the issuer i	is an investment fund, about t	the fund.						
Full legal name	Love Pharma Inc.								
Previous full legal name	Glenbriar Technolog	jies Inc.							
If the issuer's name changed in	the last 12 months, provi	ide most recent previous legal	l name.						
Website	www.love-pharma.c	om (if a	pplicable)						
If the issuer has a legal entity identifier, p	provide below. Refer to Par	t B of the Instructions for the	definition of "legal entity identif	ier".					
Legal entity identifier									
If two or more issuers distributed a single	security, provide the full l	legal name(s) of the co-issuer(	(s) other than the issuer named (	above.					
Full legal name(s) of co-issuer(s)		(if a	pplicable)						
ITEM 4 – UNDERWRITER II									
If an underwriter is completing the report	t, provide the underwriter's	s full legal name and firm NR.	D number.	1					
Full legal name									
Firm NRD number	Firm NRD number (if applicable)								
If the underwriter does not have a firm N	If the underwriter does not have a firm NRD number, provide the head office contact information of the underwriter.								
Street address				]					
Municipality		Province/State							
Country		Postal code/Zip code		]					
Telephone number		Website		(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 3 2 5 4 1 2								
If the issuer is in the <b>mining industry</b> , 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								
Cryptoassets								
b) Number of employees								
Number of employees: X 0 – 49 50 – 99 100 – 499 500 or more								
c) SEDAR profile number								
Does the issuer have a SEDAR profile?  No x Yes If yes, provide SEDAR profile number 0 0 0 6 1 6 3								
If the issuer does not have a SEDAR profile complete Item 5(d) – (h).								
d) Head office address								
Street address Province/State								
Municipality Postal code/Zip code								
Country Telephone number								
e) Date of formation and financial year-end								
Date of formation Financial year-end MM DD MM DD								
f) Reporting issuer status								
Is the issuer a reporting issuer in any jurisdiction of Canada? No Yes								
If yes, select the jurisdictions of Canada in which the issuer is a reporting issuer.								
AII AB BC MB NB NL NT								
NS NU ON PE QC SK YT								
g) Public listing status								
If the issuer has a CUSIP number, provide below (first 6 digits only).  CUSIP number								
If the issuer is publicly listed, provide the name of the exchange on which the issuer's equity securities primarily trade. Provide only the name of an exchange and not a trading facility such as, for example, an automated trading system.  Exchange name								
h) Size of issuer's assets								
Select the size of the issuer's assets based on its most recently available annual financial statements (Canadian \$). If the issuer has not prepared annual financial statements for its first financial year, provide the size of the issuer's assets at the distribution end date.  \$0 to under \$5M  \$5M to under \$25M  \$100M to under \$500M  \$500M to under \$1B								
The proposition of the propositi								

ITEM 6 – INVESTMENT FUND ISSUER INFORMATION									
If the issuer is an investment fund, provide the following information.									
a) Investment fund manager information									
Full legal name	Full legal name								
Firm NRD Number	(if applicable)								
If the investment fund manage									
Street Address	er does not have a firm NRD number, provide the head office contact information of the investment fund manager.								
Municipality	Province/State								
Country	Postal code/Zip code								
Telephone number	Website (if applicable)								
b) Type of investme									
Type of investment fund that r  Money market	nost accurately identifies the issuer (select only one).  Equity  Fixed income  Balanced								
Alternative strate									
	of the following apply to the investment fund.  in other investment fund issuers								
Is a UCITs Fund									
	stment of Transferable Securities funds (UCITs Funds) are investment funds regulated by the European Union (EU) directives that allow								
·	perate throughout the EU on a passport basis on authorization from one member state.  and financial year-end of the investment fund								
Date of formation	YYYY MM DD Financial year-end MM DD								
d) Reporting issuer	status of the investment fund								
Is the investment fund a repor	ting issuer in any jurisdiction of Canada? No Yes								
	f Canada in which the investment fund is a reporting issuer.								
All	AB BC MB NB NL NT								
☐ NS ☐	NU ON PE QC SK YT								
e) Public listing state	us of the investment fund								
ļ .	USIP number, provide below (first 6 digits only).								
CUSIP number									
1	cly listed, provide the name of the exchange on which the investment fund's securities primarily trade. Provide only not a trading facility such as, for example, an automated trading system.								
Exchange name									
_	NAV) of the investment fund								
,	vestment fund as of the date of the most recent NAV calculation (Canadian \$).								
\$0 to under \$5M	\$5M to under \$25M \$25M to under \$100M								
\$100M to under \$500M	\$500M to under \$1B \$1B or over Date of NAV calculation: YYYY MM DD								

# ITEM 7 - INFORMATION ABOUT THE DISTRIBUTION

If an issuer located outside of Canada completes a distribution in a jurisdiction of Canada, include in Item 7 and Schedule 1 information about purchasers resident in that jurisdiction of Canada only. Do not include in Item 7 securities issued as payment of commissions or finder's fees in connection with the distribution, which must be disclosed in Item 8. The information provided in Item 7 must reconcile with the information provided in Schedule 1 of the report.

a)	Currency
/	

Select the currency or currencies in which the distribution was made. All dollar amounts provided in the report must be in Canadian dollars.

			•	
X Canadian dollar	US dollar	Euro	Other (describe)	

#### b) Distribution date(s)

State the distribution start and end dates. If the report is being filed for securities distributed on only one distribution date, provide the distribution date as both the start and end dates. If the report is being filed for securities distributed on a continuous basis, include the start and end dates for the distribution period covered by the report.

Start date	2022	05	06	End date	2022	05	0
	YYYY	MM	DD		YYYY	MM	

#### c) Detailed purchaser information

## Complete Schedule 1 of this form for each purchaser and attach the schedule to the completed report.

#### d) Types of securities distributed

Provide the following information for all distributions reported on a per security basis. Refer to Part A(12) of the Instructions for how to indicate the security code. If providing the CUSIP number, indicate the full 9-digit CUSIP number assigned to the security being distributed.

					Canadian	\$		
Security code		,	CUSIP number (if applicable) Description of security		Description of security  Number of securities		Highest price	Total amount
U	В	S		Issuance of units at a price of \$0.02 per unit.  Each unit is comprised of one common share and one common share purchase warrant	2,375,000	0.02	0.02	47,500

## e) Details of rights and convertible/exchangeable securities

If any rights (e.g. warrants, options) were distributed, provide the exercise price and expiry date for each right. If any convertible/exchangeable securities were distributed, provide the conversion ratio and describe any other terms for each convertible/exchangeable security.

Convertible / exchangeable				Underlying					se price dian \$)	Expiry date	Conversion	Describe other terms (if applicable)
	security code		security code		Lowest	Highest	(YYYY-MM-DD)	ratio	,			
W	N	Т	С	М	S	0.05	0.05	2024-05-06	1:1	Each warrant entitles the holder to subscribe for one additional share at \$0.05 for a period of two years, subject to the Corporation's option to accelerate the expiry date if the stock trades at \$0.15 for 10 trading days.		

## f) Summary of the distribution by jurisdiction and exemption

State the total dollar amount of securities distributed and the number of purchasers for each jurisdiction of Canada and foreign jurisdiction where a purchaser resides and for each exemption relied on in Canada for that distribution. However, if an issuer located outside of Canada completes a distribution in a jurisdiction of Canada, include distributions to purchasers resident in that jurisdiction of Canada only.

This table requires a separate line item for: (i) each jurisdiction where a purchaser resides, (ii) each exemption relied on in the jurisdiction where a purchaser resides, if a purchaser resides in a jurisdiction of Canada, and (iii) each exemption relied on in Canada, if a purchaser resides in a foreign jurisdiction.

For jurisdictions within Canada, state the province or territory, otherwise state the country.

Province or country	Exemption relied on	Number of unique purchasers <sup>2a</sup>	Total amount (Canadian \$)				
AB	NI 45-106 2.3 [Accredited Investor]	1	2,000				
AB	Investment Dealer Exemption [BC, AB, SK, MB, NB]	3	9,000				
ВС	NI 45-106 2.3 [Accredited Investor]	3	34,500				
SK	Investment Dealer Exemption [BC, AB, SK, MB, NB]	1	2,000				
	Total dollar amount of securities distributed						
	Total number of unique purchasers <sup>2b</sup>	8					

<sup>2</sup>aln calculating the number of unique purchasers per row, count each purchaser only once. Joint purchasers may be counted as one purchaser.

<sup>2b</sup>In calculating the total number of unique purchasers to which the issuer distributed securities, count each purchaser only once, regardless of whether the issuer distributed multiple types of securities to, and relied on multiple exemptions for, that purchaser.

## g) Net proceeds to the investment fund by jurisdiction

If the issuer is an investment fund, provide the net proceeds to the investment fund for each jurisdiction of Canada and foreign jurisdiction where a purchaser resides.<sup>3</sup> If an issuer located outside of Canada completes a distribution in a jurisdiction of Canada, include net proceeds for that jurisdiction of Canada only. For jurisdictions within Canada, state the province or territory, otherwise state the country.

Province or country	Net proceeds (Canadian \$)
Total net proceeds to the investment fund	

<sup>3&</sup>quot;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.

#### h) Offering materials - This section applies only in Saskatchewan, Ontario, Québec, New Brunswick and Nova Scotia.

If a distribution has occurred in Saskatchewan, Ontario, Québec, New Brunswick or Nova Scotia, complete the table below by listing the offering materials that are required under the prospectus exemption relied on to be filed with or delivered to the securities regulatory authority or regulator in those jurisdictions.

In Ontario, if the offering materials listed in the table are required to be filed with or delivered to the Ontario Securities Commission (OSC), attach an electronic version of the offering materials that have not been previously filed with or delivered to the OSC.

	Description	Date of document or other material (YYYY-MM-DD)	Previously filed with or delivered to regulator? (Y/N)	Date previously filed or delivere (YYYY-MM-DD)	
1.					
2.					
3.					

ITEM 8 - COMPENSA	ATION INFO	RMATION							
Provide information for each person (as defined in NI 45-106) to whom the issuer directly provides, or will provide, any compensation in connection with the distribution. <b>Complete additional copies of this page if more than one person was, or will be, compensated.</b>									
Indicate whether any compensation was paid, or will be paid, in connection with the distribution.									
No X Yes If yes, indicate number of persons compensated.									
a) Name of person co	ompensated ar	nd registration st	atus						
Indicate whether the person cor	mpensated is a re	gistrant.							
If the person compensated is an individual, provide the name of the individual.									
Full legal name of individua									
If the person compensated is no		mily name		st given nam	е	Second	lary giver	n names	
If the person compensated is no Full legal name of r	Ī	PI Financial Co	_	n.					$\neg$
_	<u>.</u>	111 manolal oc			<i></i>	11.			
FIRM Indicate whether the person cor	NRD number	ated the distribution	-		(if applica tal or an		sad nort	ral	
X No Yes	препѕитей јасши	nea the distribution	ir tillough u	runuing por	tut or un	internet-bu	seu port	at.	
b) Business contact i	information								
If a firm NRD number is not pro	ovided in Item 8(a	), provide the busir	ness contact	information	of the pe	erson being	compen	sated.	
Street address									
Municipality				Province	e/State				
Country			Pos	tal code/Zi	p code				
Email address			Τe	elephone r	number				
c) Relationship to iss	suer or investme	ent fund manage	er						
Part B(2) of the Instructions and Connected with the is	d the meaning of suer or investme	"control" in section nt fund manager							ed" in
Insider of the issuer (d		,							
Director or officer of th			und manage	r					
Employee of the issue	er or investment f	und manager							
X None of the above									
d) Compensation det	tails								
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	3,800								
Value of all securities distributed as compensation <sup>4</sup>	0	Sec	urity codes	Security of N	T T	Security of	code 2	Security cod	le 3
Describe terms o	of warrants, option	ns or other rights	years from	the date o	f closing,	subject to	the Corp	r a period of 2 poration's option \$0.15 for 10	on
Other compensation <sup>5</sup>		Describe							
Total compensation paid	3,800			-					
l <u> </u>	will or may recei	ve any deferred co	ompensation	(describe t	he terms	below)			

TEM 9 – DIRECTORS, EXECUTIVE OFFICERS AND PROMOTERS OF THE ISSUER									
If the issuer is an investment fund	, do not complete Ite	em 9. Proceed t	o Item 10.						
If the issuer is an investment fund, do not complete Item 9. Proceed to Item 10.  Indicate whether the issuer is any of the following (select the one that applies – if more than one applies, select only one).  X Reporting issuer in any jurisdiction of Canada  Foreign public issuer  Wholly owned subsidiary of a reporting issuer in any jurisdiction of Canada <sup>6</sup> Provide name of reporting issuer  Wholly owned subsidiary of a foreign public issuer  Issuer distributing only eligible foreign securities and the distribution is to permitted clients only <sup>7</sup> If the issuer is at least one of the above, do not complete Item 9(a) – (c). Proceed to Item 10.  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.  '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(f) of the instructions.									
If the issuer is none of the			e Item 9(a) – (	(c).					
a) Directors, executive off		-		•					
Provide the following information for territory, otherwise state the country.  Organization or company name		e officer and promoter of the issuer		given	Business location of non-individual or residential jurisdiction of individual		da, state the province or  Relationship to     issuer     (select all that     apply)		
						or country	D	0	Р
b) Promoter information									
If the promoter listed above is not an locations within Canada, state the pr Officer.	•	_					-		
Organization or company name	Family name	First given name	Secondary juriso ind names Prov		ividual (select one		nship to promoter or both if applicable)		
				CC	ountry				
c) Residential address of	each individual								

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 to file a completed report of exempt distribution.

By completing the information below, I certify, on behalf of the issuer/underwriter/investment fund manager, to the securities regulatory authority or regulator, as applicable, that I have reviewed this report and to my knowledge, having exercised reasonable diligence, the information provided in this report is true and, to the extent required, complete.

Name of issuer/underwriter/ investment fund manager/agent	Love Pharma Inc.					
Full legal name	Stadnyk					
	Family name	First given nam	given name Secondary given nar			
Title	President, CEO					
Telephone number	647 980-7541	Email address	Zach.stadnyk@gmail.com		mail.com	
Signature	(signed) "Zach Stadnyk"	Date 2022 05		06		
			YYYY	MM	DD	

# 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.

X Same as indi	ividual certifying the re	port			
Full legal name				Title	
•	Family name	First given name	Secondary given names		
Name of company					
Telephone number		E	mail address		

#### 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.

The attached 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.