IT IS AN OFFENCE TO MAKE A MISREPRESENTATION IN THIS REPORT

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
	elect only one). For guidance regarding whether an issuer is an investment fund, refer to section 1.1 of Fund Continuous Disclosure and the companion policy to NI 81-106.
Investment fund issuer	
X Issuer (other than an investment of the state of the st	nent fund)
Underwriter	
ITEM 3 - ISSUER NAME AND OTHE	r Identifiers
Provide the following information about t	he issuer, or if the issuer is an investment fund, about the fund.
Full legal name	AI/ML Innovations Inc.
Previous full legal name	
if the issuer's name changed i	n the last 12 months, provide most recent previous legal name.
Website	https://aiml-innovations.com/ (if applicable)
If the issuer has a legal entity identifier, p	provide below. Refer to Part B of the Instructions for the definition of "legal entity identifier".
Legal entity identifier	

ITEM 4 - UNDERWRITE	R INFORMATION			
If an underwriter is comple	eting the report, provide the underw	vriter's full legal name and fi	irm National Registration Database (NR	PD) number.
Full legal name				
Firm NRD number		(if applicable	e)	
If the underwriter does not	t have a firm NRD number, provide	the head office contact info	ormation of the underwriter.	
Street address				
Municipality		Province/State		
Country		Postal code/Zip code		
Telephone number		Website		(if applicable)
ITEM 5 - ISSUER INFOR	MATION			
If the issuer is an investm	ent fund, do not complete Item 5	5. Proceed to Item 6.		
a) Primary industry				
Provide the issuer's North A business activity. For more	merican Industry Classification Sta information on finding the NAICS in	andard (NAICS) code (6 dig ndustry code go to Statistic	its only) that corresponds to the issuer's Canada's NAICS industry search to	s primary ool.
	NAICS industry code 5	4 1 7 1	0	
	g industry, indicate the stage of op the category that best describes the		oly to issuers that provide services to iss ns.	suers operating in
Exploration	Development Prod	uction		
Is the issuer's primary busin Mortgages		of its assets in any of the formation of	ollowing? If yes, select all that apply. Consumer debt Priva	te companies
b) Number of emplo	yees			
Number of employee	es: X 0 – 49 5	50 – 99 100 – 499	500 or more	
c) SEDAR profile nu	ımber			
Does the issuer have a <u>SEL</u>		e SEDAR profile number	0 0 0 0 7 4 8 4	4
If the issuer does not have	e a SEDAR profile complete Item	n 5(d) – (h).		
d) Head office addre	ess			
Street address			Province/State	
Municipality			ostal code/Zip code	
Country			Telephone number	
e) Date of formation	and financial year-end			
Date of formation		Financial year-en	d l	

YYYY 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 names of all exchanges on which its securities are listed. Include only the issuer has applied for and received a listing, which excludes, for example, automated trading systems.	the names of exchanges for which
Exchange names	
h) Size of issuer's assets	
Select the size of the issuer's assets for its most recent financial year-end (Canadian \$). If the issuer has not exceeded the size of the issuer sassets for its most recent financial year-end (Canadian \$).	isted for a full financial year,
provide the size of the issuer's assets at the distribution end date. \$0 to under \$5M \$5M to under \$25M \$25M to under \$100M	
\$100M to under \$500M \$500M to under \$1B \$1B or over	
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	
Firm NRD Number (if applicable)	
If the investment fund manager does not have a firm NRD number, provide the head office contact information	of the investment fund manager.
Street Address	
Municipality Province/State	
Country Postal code/Zip code	
Telephone number Website (if applicable)	
b) Type of investment fund	
Time of investment find that ment accurately identifies the incurs (colors only one)	
Type of investment fund that most accurately identifies the issuer (select only one). Money market Equity Fixed income	
Balanced Alternative strategies Other (describe)	
Indicate whether one or both of the following apply to the investment fund.	
Invests primarily in other investment fund issuers	
invests primarily in other investment fund issuers	

Undertaking for the Collective Investment of Transferable Securities funds (UCT's Funds) are investment funds regulated by the European Union (EU) directives that allow collective investment schemes to operate throughout the EU on a passport basis on authorization from one member state.
c) Date of formation and financial year-end of the investment fund
Date of formation
d) Reporting issuer status of the investment fund
Is the investment fund a reporting issuer in any jurisdiction of Canada?
If yes, select the jurisdictions of Canada in which the investment fund is a reporting issuer.
AII AB BC MB NB NL NT
NS NU ON PE QC SK YT
e) Public listing status of the investment fund
If the investment fund has a CUSIP number, provide below (first 6 digits only).
CUSIP number
If the investment fund is publicly listed, provide the names of all exchanges on which its securities are listed. Include only the names of exchanges for which the investment fund has applied for and received a listing, which excludes, for example, automated trading systems.
Exchange names
f) Net asset value (NAV) of the investment fund
Select the NAV range of the investment 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: YYY M D Y M D
Trans 7. Incorporation Apont the Distriction
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, which should 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 2023 06 08 End date 2023 06 08 YYYY MM DD YYYY MM DD
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 that take place in a jurisdiction of Canada on a per security basis. Refer to Part A 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 CUSIP number (if applicable)		number Description of security		Single or lowest price	Highest price	Total amount		
U	В	S		Units (1 Common Share and 1 Common Share purchase warrant)	10,811,792	\$0.075		\$810,884.40

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.

, , , ,	v Oi tii	310/ OXC	,,,a,,	goud	,,,,	ourney.					
		ecurity	,		nderly securi	_		se price adian \$)	Expiry date (YYYY-MM-	Conversion	Describe other terms (if applicable)
		code			code	•	Lowest	Highest	DD)	ratio	` · · · · · · · ·
	V	Z	Т	С	M	S	\$0.10	\$0.50	2028-06-08	1:1	Each warrant entitles the holder to subscribe for one additional share. The exercise price for the first year will be \$.10 per share, for the second year \$.20 per share, for the third year \$.30 per share, for the fourth year \$.40 per year and for the fifth year \$.50 per share. The Warrants will also have an acceleration if the Shares trade at a price equal or above a price equal to 400% of the exercise price for at least 20 consecutive 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 purchasers	Total amount (Canadian \$)
AB	NI 45-106 2.3 [Accredited investor]	2	\$26,250.00
AB	NI 45-106 2.5 [Family, friends and business associates]	1	\$11,250.00
BC	NI 45-106 2.3 [Accredited investor]	3	\$157,500.00
BC	NI 45-106 2.5 [Family, friends and business associates]	3	\$19,950.00
MB	NI 45-106 2.3 [Accredited investor]	1	\$15,000.00
ON	NI 45-106 2.3 [Accredited investor]	2	\$41,250.00
QC	NI 45-106 2.3 [Accredited investor]	1	\$15,000.00
United Arab Emirates	NI 45-106 2.3 [Accredited investor]	1	\$15,000.00
			\$301,200.00
	Total number of unique purchasers	14	

²In 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.³ 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 \$)
N/A	
Total net proceeds to the investment fund	

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.

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 delivered (YYYY-MM-DD)	
1.	N/A				

ITEM 8 - COMPENSATION INFORMATION						
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. Complete additional copies of this page if more than one person was, or will be, compensated.						
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.						
Name of person compensated and registration status						
Indicate whether the person compensated is a registrant. No x Yes						

If the person compensated is an individual, prov	ide the name of the indivi	dual.		
Full legal name of individual				
	Family name	First given name	Secondary giver	n names
If the person compensated is not an individual, p		mation.		
Full legal name of non-individ	dual PI Financial Corp.			
Firm NRD num	ber 5 2 9 0	(if applic	able)	
Indicate whether the person compensated facilit x No Yes	ated the distribution throu	gh a funding portal or an in	ternet-based portal.	
b) Business contact information				
If a firm NRD number is not provided in Item 8(a), provide the business co	ontact information of the per	son being compens	ated.
Street address				
Municipality		Province/State		
Country		Postal code/Zip code		
Email address		Telephone number		
c) Relationship to issuer or investment fu	und manager			
Indicate the person's relationship with the issuer		ger (select all that apply). F	Refer to the meaning	of "connected" in Part
B(2) of the Instructions and the meaning of "con Connected with the issuer or investi	trol" in section 1.4 of NI 45			
	Ü			
Insider of the issuer (other than an i	nvestment fund)			
Director or officer of the investment	fund or investment fund n	nanager		
Employee of the issuer or investme	nt fund manager			
x None of the above				
d) Compensation details				
Provide details of all compensation paid, or to be amounts in Canadian dollars. Include cash compayments for services incidental to the distribution details about, or report on, internal allocation arrissuer.	missions, securities-based on, such as clerical, printil	d compensation, gifts, discong, legal or accounting serv	unts or other compe ices. An issuer is no	ensation. Do not report of required to ask for
Cash commissions paid \$2,700				
Value of all securities distributed		Security code 1	Security code 2	Security code 3
as compensation ⁴ \$0	Security	codes W N T		
Describe terms of warrar	nts, options or other rights	Issuance of 36,000 finde exercisable to purchase Issuer. The exercise prishare, for the second yes \$.30 per share, for the for fifth year \$.50 per share. June 8, 2028.	one additional comr ice for the first year ar \$.20 per share, fo ourth year \$.40 per y	mon share of the will be \$.10 per or the third year year and for the
Other compensation ⁵ 0	Describe			
Total compensation paid \$2,700				
Check box if the person will or may re	eceive any deferred comp	ensation (describe the term	s below)	
	<u> </u>	·	· · · · · · · · · · · · · · · · · · ·	

⁴Provide the aggregate value of all securities distributed as compensation, excluding options, warrants or other rights exercisable to acquire additional securities of the issuer. Indicate the security codes for all securities distributed as compensation, including options, warrants or other rights exercisable to acquire additional securities of the issuer. ⁵Do not include deferred compensation. Name of person compensated and registration status Indicate whether the person compensated is a registrant. x No Yes If the person compensated is an individual, provide the name of the individual. Full legal name of individual | Wiebe John Family name First given name Secondary given names If the person compensated is not an individual, provide the following information. Full legal name of non-individual Firm NRD number (if applicable) Indicate whether the person compensated facilitated the distribution through a funding portal or an internet-based portal. x No b) Business contact information If a firm NRD number is not provided in Item 8(a), provide the business contact information of the person being compensated. Street address 360 H Provencher Blvd. Municipality Winnipeg Province/State Manitoba Country Canada Postal code/Zip code R2H 0H1 204-697-1337 Email address john@studiofloors.ca Telephone number c) Relationship to issuer or investment fund manager Indicate the person's relationship with the issuer or investment fund manager (select all that apply). Refer to the meaning of "connected" in Part B(2) of the Instructions and the meaning of "control" in section 1.4 of NI 45-106 for the purposes of completing this section. Connected with the issuer or investment fund manager Insider of the issuer (other than an investment fund) Director or officer of the investment fund or investment fund manager Employee of the issuer or investment fund manager None of the above 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 \$1,050 Security code 2 Security code 3 Security code 1 Value of all securities distributed Security codes as compensation4 Describe terms of warrants, options or other rights Other compensation5 Describe \$1,050 Total compensation paid Check box if the person will or may receive any deferred compensation (describe the terms below)

⁴ Provide the aggregate value of all securities distributed as compensation, <u>excluding</u> options, warrants or other rights exercisable to acquire							
additional securities of the issuer. Indicate the security codes for all securities distributed as compensation, including options, warrants or other							
rights exercisable to acquire additional securities of the issuer. ⁵ Do not include deferred compensation.							
a) Name of person compensated and registration status Indicate whether the person compensated is a registrant.							
No x Yes							
If the person compensated is an individual, provide the name of the individual.							
Full legal name of individual							
Family name First given name Secondary given names							
If the person compensated is not an individual, provide the following information.							
Full legal name of non-individual Research Capital Corporation							
Firm NRD number 3 0 7 0 (if applicable)							
Indicate whether the person compensated facilitated the distribution through a funding portal or an internet-based portal.							
x No Yes							
b) Business contact information							
If a firm NRD number is not provided in Item 8(a), 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 investment fund manager							
Indicate the person's relationship with the issuer or investment fund manager (select all that apply). Refer to the meaning of "connected" in Part							
B(2) of the Instructions and the meaning of "control" in section 1.4 of NI 45-106 for the purposes of completing this section.							
Connected with the issuer or investment fund manager							
Insider of the issuer (other than an investment fund)							
Director or officer of the investment fund or investment fund manager							
Employee of the issuer or investment fund manager							
x 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 \$2,362.50							
04311 001111113310113 Paild							
Value of all securities distributed \$0 Security code 1 Security code 2 Security code 3							
as compensation ⁴ WNT							
Issuance of 31,500 finder's warrants. Each finder's warrant is							
exercisable to purchase one additional common share of the Issuer. The exercise price for the first year will be \$.10 per							
Describe terms of warrants, options or other rights share, for the second year \$.20 per share, for the third year							
\$.30 per share, for the fourth year \$.40 per year and for the fifth year \$.50 per share. Expiry date of finders' warrants is							
July 4, 2028.							
Other compensation ⁵ 0 Describe							

Total compensation paid	\$2,362.50								
Check box if the person will or may receive any deferred compensation (describe the terms below)								i	
⁴ Provide the aggregate value of all securities distributed as compensation, <u>excluding</u> options, warrants or other rights exercisable to acquire additional securities of the issuer. Indicate the security codes for all securities distributed as compensation, <u>including</u> options, warrants or other rights exercisable to acquire additional securities of the issuer. ⁵ Do not include deferred compensation.									
20									
ITEM 9 — DIRECTORS, EXECUTIVE OFFICERS AND PROMOTERS OF THE ISSUER									
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 all that apply).									
X Reporting issuer in any jurisdiction	• ,	ан шасарруу).							
Foreign public issuer									
Wholly owned subsidiary of a	renorting issuer in a	any jurisdiction o	of Canada ⁶						
	of reporting issuer	iny juniouionion c	7 Gariaga						
Wholly owned subsidiary of a foreign public issuer ⁶									
Provide name of foreign public issuer									
Issuer distributing eligible foreign securities only to permitted clients 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 a	bove, check this b	oox and comple	ete Item 9(a) -	- (c).					
a) Directors, executive officers	and promoters of t	he 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 name	Secondary given names		Business location of non-individual or residential jurisdiction of individual		Relationship to issuer (select all that apply)		
					Province	or country	D	0	Р
			1						
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 company name	Family name	First given name	Secondary given names	juriso	esidential isdiction of ndividual Relationship to promoter (select one or both if applicable)				

		Province or country	D	0

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 or director 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 not be delegated to an agent or other individual preparing the report on behalf of the issuer or underwriter. If the individual completing and filing the report is different from the individual certifying the report, provide their name and contact details 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.

IT IS AN OFFENCE TO MAKE A MISREPRESENTATION IN THIS REPORT

By completing the information below, I certify to the securities regulatory authority or regulator that:

- I have read and understand this report; and
- all of the information provided in this report is true.

Full legal name	Fallis	Robert		Moi	rgan	
	Family name	First given nam	ne	Secondary given name		
Title	Office Manager					
Name of issuer/underwriter/ investment fund manager	AI/ML Innovations Inc.					
Telephone number	778-405-0882	Email address	Morganf.aiml@gmail.com			
Signature	Morgan Fallis	Date	2023 YYYY	07 MM	12 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 individ	dual certifying the report			
Full legal name				Title
_	Family name	First given name	Secondary give names	n
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.

Schedule 2 to Form 45-106F1 (Confidential Director, Executive Officer, Promoter and Control Person Information)

Schedule 2 must be filed in the format of an Excel spreadsheet in a form acceptable to the securities regulatory authority or regulator.

N/A

Questions:

Refer any questions to:

Alberta Securities Commission

Suite 600, 250 – 5th Street SW Calgary, Alberta T2P 0R4 Telephone: (403) 297-6454 Toll free in Canada: 1-877-355-0585

Facsimile: (403) 297-2082

British Columbia Securities Commission

P.O. Box 10142, Pacific Centre 701 West Georgia Street Vancouver, British Columbia V7Y 1L2 Inquiries: (604) 899-6854 Toll free in Canada: 1-800-373-6393

Toll free in Canada: 1-800-373-6393 Facsimile: (604) 899-6581

Email: inquiries@bcsc.bc.ca

The Manitoba Securities Commission

500 – 400 St. Mary Avenue Winnipeg, Manitoba R3C 4K5 Telephone: (204) 945-2548

Toll free in Manitoba 1-800-655-5244

Facsimile: (204) 945-0330

Financial and Consumer Services Commission (New Brunswick)

85 Charlotté Street, Suite 300 Saint John, New Brunswick E2L 2J2 Telephone: (506) 658-3060 Toll free in Canada: 1-866-933-2222

Facsimile: (506) 658-3059 Email: info@fcnb.ca

Government of Newfoundland and Labrador Financial Services Regulation Division

P.O. Box 8700 Confederation Building 2nd Floor, West Block Prince Philip Drive St. John's, Newfoundlar

St. John's, Newfoundland and Labrador A1B 4J6

Attention: Director of Securities Telephone: (709) 729-4189 Facsimile: (709) 729-6187

Government of the Northwest Territories Office of the Superintendent of Securities

P.O. Box 1320

Yellowknife, Northwest Territories X1A 2L9

Attention: Deputy Superintendent, Legal & Enforcement

Telephone: (867) 920-8984 Facsimile: (867) 873-0243

Nova Scotia Securities Commission

Suite 400, 5251 Duke Street Duke Tower P.O. Box 458 Halifax, Nova Scotia B3J 2P8

Telephone: (902) 424-7768 Facsimile: (902) 424-4625

Government of Nunavut Department of Justice

Legal Registries Division P.O. Box 1000, Station 570 1st Floor, Brown Building Iqaluit, Nunavut X0A 0H0 Telephone: (867) 975-6590 Facsimile: (867) 975-6594

Ontario Securities Commission

20 Queen Street West, 22nd Floor Toronto, Ontario M5H 3S8 Telephone: (416) 593- 8314 Toll free in Canada: 1-877-785-1555

Facsimile: (416) 593-8122

Email: exemptmarketfilings@osc.gov.on.ca

Public official contact regarding indirect collection of information:

Inquiries Officer

Prince Edward Island Securities Office

95 Rochford Street, 4th Floor Shaw Building P.O. Box 2000

Charlottetown, Prince Edward Island C1A 7N8

Telephone: (902) 368-4569 Facsimile: (902) 368-5283

Autorité des marchés financiers

800, Square Victoria, 22e étage C.P. 246, Tour de la Bourse Montréal, Québec H4Z 1G3

Telephone: (514) 395-0337 or 1-877-525-0337 Facsimile: (514) 873-6155 (For filing purposes only) Facsimile: (514) 864-6381 (For privacy requests only)

Email: financementdessocietes@lautorite.qc.ca (For corporate finance issuers); fonds_dinvestissement@lautorite.qc.ca (For

investment fund issuers)

Financial and Consumer Affairs Authority of Saskatchewan

Suite 601 - 1919 Saskatchewan Drive Regina, Saskatchewan S4P 4H2 Telephone: (306) 787-5879 Facsimile: (306) 787-5899

Government of Yukon

Department of Community Services

Law Centre, 3rd Floor 2130 Second Avenue Whitehorse, Yukon Y1A 5H6 Telephone: (867) 667-5314 Facsimile: (867) 393-6251