Form 45-106F1 Report of Exempt Distribution

IT IS AN OFFENCE TO MAKE A MISREPRESENTATION IN THIS REPORT

ITEM 1 - REPORT TYPE							
✓ New report							
Amended report If amen	ded, provide filing date	of report that is being am	ended (YYYY-MM-DD)				
ITEM 2 - PARTY CERTIFYING THE	TEM 2 - PARTY CERTIFYING THE REPORT						
Indicate the party certifying the report (sele National Instrument 81-106 Investment Fur							
☐ Investment fund issuer							
✓ Issuer (other than an inves	stment fund)						
☐ Underwriter							
ITEM 3 - ISSUER NAME AND OTH	HER IDENTIFIERS						
Provide the following information about the	e issuer, or if the issuer is an in	vestment fund, about the fund.					
Full legal name	Liberty Leaf Holdings L	_td.					
Previous full legal name							
If the issuer's name changed in a	the last 12 months, provide mo	ost recent previous legal name.					
Website			(if applicable)				
If the issuer has a legal entity identifier₋ pro	vide below. Refer to Part B of t	the Instructions for the definition	of "legal entity identifier".				
Legal entity identifier							
ITEM 4 - UNDERWRITER INFORM	ATION						
If an underwriter is completing the report, p	rovide the underwriter's full le	gal name and firm National Reg	istration Database (NRD) number.				
Full legal name							
Firm NRD number	Firm NRD number (if applicable)						
If the underwriter does not have a firm NRD number, provide the head office contact information of the underwriter.							
Street address	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 corresponds to the issuer's primary business activity. For more information on finding the NAICS industry code go to Statistics Canada's NAICS industry search tool . NAICS industry code 1 1 1 9 9 9						
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						
b) Number of employees						
Number of employees:						
c) SEDAR profile number						
Does the issuer have a SEDAR profile? No Yes If yes, provide SEDAR profile number 0 0 0 2 3 8 3 0 If the issuer does not have 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 jurisdication of Canada? No Yes						
If yes, select the jurisdictions of Canada in which the issuer is a reporting issuer.						
L AII L AB L BC L MB L NB L 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 names of exchanges for which the issuer has applied for and received a listing, which excludes, for example, automated trading systems.						
Exchange name(s):						
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 existed for a full financial year, provide the size of the issuer's assets at the distribution end date.						
So to under \$5M S5M to under \$25M S25M to under \$100M						
☐ \$100M to under \$500M ☐ \$500M to under \$1B ☐ \$1B or over						

ITEM 6 - INVESTMENT	Item 6 - Investment Fund Issuer Information						
If the issuer is an invest	If the issuer is an investment fund, provide the following information.						
a) Investment fund ma	a) Investment fund manager information						
Full legal name							
Firm NRD number	(if applicable)						
If the investment fund ma	nager does not have a firm NRD number, provide the head office contact information of the investment fund manager.						
Street address							
Municipality	Province/State Province/State						
Country	Postal code/Zip code						
Telephone number	Website (if applicable)						
b) Type of investment	fund						
Type of investment fund tha	t most accurately identifies the issuer (select only one) .						
☐ Money market	☐ Equity ☐ Fixed income						
☐ Balanced	Alternative strategies Other (describe)						
Indicate whether one or boti	h of the following apply to the investment fund .						
☐ Invests primarily in	other investment fund issuers						
☐ Is a UCITs Fund¹							
	ve Investment of Transferable Securities funds (UCITs Funds) are investment funds regulated by the European Union (EU) re investment schemes to operate throughout the EU on a passport basis on authorization from one member state.						
c) Date of formation a	and financial year-end of the investment fund						
Date of format							
d) Reporting issuer st	YYYY MM DD MM DD atus of the investment fund						
, 1							
	orting issuer in any jurisdication of Canada? No Yes of Canada in which the investment fund is a reporting issuer.						
All	AB BC MB NB NL NT						
□ NS □	NU ON PE QC SK TT						
e) Public listing status	s of the investment fund						
If the investment fund has a	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 issuer has applied for and received a listing, which excludes, for example, automated trading systems.							
Exchange nam	es						
f) Net asset value (NA	AV) of the investment fund						
Select the NAV range of the	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 \$500	DM \$500M to under \$1B \$1B or over Date of NAV calculation: YYYY MM DD						

ITEM	TEM 7 - INFORMATION ABOUT THE DISTRIBUTION											
purch	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)	Curren	СУ										
Selec	t the curre	ency or currenci	es in whi	ch the distril	bution wa	ıs made. All	dollar amounts provided i	n the repo	rt mus	t be in	Canadia	n dollars.
\checkmark	Canad	ian dollar		6 dollar		Euro	Other (describe)				
b)	Distribu	ution date(s)										
as b	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.											
		Sta	art date	2017	05	24	End date	2017		05	24	
				YYYY	MM	DD		YYYY	ſ	MM	DD	
c)	Detaile	d purchaser in	nformati	on								
Com	plete Sci	hedule 1 of th	nis form	for each	purchas	er and at	ach the schedule to t	he comp	leted	repor	t.	
d)	Types	of securities d	istribute	ed								
Ins dis	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. The information included in item 7d must reconcile to item 7f. For examples on how to report convertible securities, see our Frequently Asked Questions.											
_										(Canadian 9	5
	Security	CUSIP number (if applicable)		Description	on of secu	rity	Number of securities	Single lowes price	t	Highe	est price	Total amount

					Canadian \$	
Security code CUSIP number (if applicable)		Description of security	Number of securities	Single or lowest price	Highest price	Total amount
UBS		Each UBS consists of one share and one transferable warrant, exercisable at \$0.20 for 24 months from closing, subject to accelerated expiry		0.1250	0.1250	283,750.00

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.

	curit			derly urity	ing code	Exercise price (Canadian \$)		Expiry date (YYYY- MM-DD)	Conversion ratio	Describe other items (if applicable)
						Lowest	Highest			
W	N	Т	С	М	S	0.2000	0.2000	2019-05-24		

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 \$)
British Columbia	NI 45-106 2.5 [Family, friends and business associates]	3	54,500.00
British Columbia	NI 45-106 2.3 [Accredited investor]	1	25,000.00
Ontario	NI 45-106 2.3 [Accredited investor]	2	137,500.00
Newfoundland and Labrador	NI 45-106 2.3 [Accredited investor]	8	66,750.00
	283,750.00		

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. 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	

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)

TTEM 8 - COMPENSATION	ON INFORMATION					
	person (as defined in NI 45-106) to whom t ete additional copies of this page if mor		•	•		
Indicate whether any compen	sation was paid, or will be paid, in connecti					
☐ No ☑ Yes	If yes, indicate number of pers	ons compensated.	3			
a) Name of person com	pensated and registration status					
Indicate whether the perso	on compensated is a registrant.	✓ No	Yes			
If the person compensated is	s an individual, provide the name of the ind	ividual.				
Full legal name of indi	ividual Kenney	John				
	Family name	First given name	e Secor	ndary given names		
If the person compensated	is not an individual, provide the following is	nformation.				
Full legal name	e of non-individual					
I	Firm NRD number		(if appli	icable)		
Indicate whether the perso	n compensated facilitated the distribution t	hrough a funding portal	l or an internet-base	d portal. Ves		
b) Business contact info	ormation					
If a firm NRD number is not	provided in Item 8 (a), provide the business	contact information of	the person being co	mpensated.		
Street address	27 Melvill Place					
Municipality	Gander]	Province/State	Newfoundland and Labrador		
Country	Canada	Posta	Il code/Zip code	A1V0C3		
Email address		Tele	ephone number			
c) Relationship to issue	r or investment fund manager					
Indicate the person's relation	nship with the issuer or investment fund ma the meaning of "control" in section 1.4 of N					
Connect with the iss	uer or investment fund manager	Inside	er of the issuer (oth	er than an investment fund)		
Director or officer of	the investment fund or investment fund m	anager	loyee of the issuer o	or investment fund manager		
✓ None of the above						
d) Compensation detail	S					
Canadian dollars. Include ca services incidental to the dist	nsation paid, or to be paid, to the person ide sh commissions, securities-based compensa tribution, such as clerical, printing, legal or o gements with the directors, officers or emplo	tion, gifts, discounts or accounting services. An	other compensation. issuer is not required	Do not report payments for I to ask for details about, or report		
Cash commissions p	5,925.00	Security codes	Security code 1	Security code 2 Security code 3		
Value of all securit distributed compensati	ies as	·	W N T			
Describe terms of warrants, options or other rights 47,400 warrants exercisable into shares at \$0.20 for 24 months						
Other compensation	17,100 Walland Oxfoloasio into charco at \$6.20 for 2 finionalio					
Total compensation p	Sales estripe leates.					
	erson will or may receive any deferred cor	mpensation (describe th	ne terms below)			
	2	1				
additional securities of the	ue of all securities distributed as compensa issuer. Indicate the security codes for all so the additional securities of the issuer. Impensation.					

a) Name of person compensated and registration status							
Indicate whether the person com	Indicate whether the person compensated is a registrant. No Yes						
If the person compensated is an ind	If the person compensated is an individual, provide the name of the individual.						
Full legal name of individual Kenney		Ray					
	Family name	First given name	Seco	ndary given names			
If the person compensated is not a	n individual, provide the following in	nformation.					
Full legal name of no	on-individual						
Firm N	Firm NRD number (if applicable)						
Indicate whether the person comp	ensated facilitated the distribution th	nrough a funding portal	or an internet-base	ed portal. Ves			
b) Business contact information	on						
If a firm NRD number is not provide	ed in Item 8 (a), provide the business	contact information of t	the person being co	mpensated.			
Street address 27 M	elvill Place						
Municipality Gand	der		Province/State	Newfoundland and Labrador			
Country	ada	Postal	code/Zip code	A1V0C3			
Email address		Tele	phone number				
c) Relationship to issuer or in	vestment 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. Connect 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							
Canadian dollars. Include cash com services incidental to the distribution on, internal allocation arrangement	paid, or to be paid, to the person ide missions, securities-based compensa n, such as clerical, printing, legal or a s with the directors, officers or emplo	tion, gifts, discounts or o eccounting services. An is	ther compensation ssuer is not required	. Do not report payments for d to ask for details about, or report			
Cash commissions paid	3,000.00	Security codes	Security code 1	Security code 2 Security code 3			
Value of all securities distributed as compensation ⁴			W N T				
Describe terms	Describe terms of warrants, options or other rights						
Other compensation ⁵	Other compensation ⁵ Describe 24,000 warrants exercisable into shares at \$0.20 for 24 months						
Total compensation paid	3,000.00						
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, <u>including</u> 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. Ves					
If the person compensated is an individual, provide	If the person compensated is an individual, provide the name of the individual.				
Full legal name of individual					
Fami	ame First given name Secondary given names				
If the person compensated is not an individual, pro	de the following information.				
Full legal name of non-individual	ID Financial Inc.				
Firm NRD number	(if applicable)				
Indicate whether the person compensated facilitat	the distribution through a funding portal or an internet-based portal. Ves				
b) Business contact information					
,	vide the business contact information of the person being compensated.				
Street address 398 de Maisonneux	Blvd W				
Municipality Montreal	Province/State Québec				
, ,					
Email address	Telephone number				
c) Relationship to issuer or investment fund	•				
·	restment fund manager (select all that apply). Refer to the meaning of "connected" in Part In section 1.4 of NI 45-106 for the purposes of completing this section.				
Connect with the issuer or investment fund	anager Insider of the issuer (other than an investment fund)				
Director or officer of the investment fund or	vestment fund manager				
✓ None of the above					
d) Compensation details					
Canadian dollars. Include cash commissions, securit services incidental to the distribution, such as clerical	to the person identified in Item 8(a) in connection with the distribution. Provide all amounts in based compensation, gifts, discounts or other compensation. Do not report payments for printing, legal or accounting services. An issuer is not required to ask for details about, or report officers or employees of a non-individual compensated by the issuer.				
Cash commissions paid 9,20	Security codes Security code 1 Security code 2 Security code 3				
Value of all securities distributed as compensation ⁴ Security codes Security code 1 Security code 2 Security code 3 W N T					
Describe terms of warrants, opti	Describe terms of warrants, options or other rights 73,600 warrants exercisable into shares at \$0.20 for 24 months				
Other compensation ⁵					
Total compensation paid 9,200	0				
Check box if the person will or may recei	any deferred compensation (describe the terms below)				
	ted as compensation, excluding options, warrants or other rights exercisable to acquire				
additional securities of the issuer. Indicate the sec rights exercisable to acquire additional securities of	ty codes for all securities distributed as compensation, <u>including</u> options, warrants or other				

ГЕМ	9 - DIRECTORS, EXECUTIV	VE OFFICERS A	AND PROMO	TERS OF THE IS	SSUER							
If the issuer is an investment fund, do not complete Item 9. Procced to Item 10.												
Indicate whether the issuer is any of the following (select all that apply).												
Reporting issuer in any jurisdiction of Canada												
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 f	er 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. 6An 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. 1 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 name	Secondary giver names	Business location of non-individual or residentail jurisdiction of individual		Relationship to issuer (select all that apply)		that			
					Province o	r 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 company name	Family name	First given name	Secondary given names			tionship to promoter ne or both if applicable)					
					Province or country	D		C)			
c)	Residential address of each in	ndividual										

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	Pladson	Kelly					
Family name		First given name		Secondary given names			
Title	Corporate Secretary						
Name of issuer/underwriter/ investment fund manager	Liberty Leaf Holdings Ltd.						
Telephone number	6047266749	Email address	kellypladson@icloud.com				
Signature Kelly Pladson		Date	2017	05	30		
		_	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. Same as individual certifying the report Full legal name Family name First given name Secondary given names Name of company Telephone number Email 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:

- 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 Schedules 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.