Form 45-106F1 Report of Exempt Distribution

ITEM 1 - REPORT TYPE					
✓ New report					
☐ Amended report If ame	nded, provide filing date	of report that i	s being ame	ended	(YYYY-MM-DD)
ITEM 2 - PARTY CERTIFYING TH	E 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	naous Disclosure and the comp	amon policy to tvi	01 100.		
✓ Issuer (other than an inves	stment fund)				
Underwriter	samone rana,				
ITEM 3 - ISSUER NAME AND OT					
Provide the following information about to			out the fund.		
Full legal name	Rockshield Capital Cor	ocksnield Capital Corp.			
Previous full legal name					
If the issuer's name changed in th	e last 12 months, provide most	recent previous le	gal name.		
Website	www.rockshield.ca		(if applicable)		
If the issuer has a legal entity identifier, pr	ovide below. Refer to Part B of t	he Instructions for	the definition	of "legal entity identifier".	
Legal entity identifier					
If two or more issuers distributed a single	security, provide the full legal no	ame(s) of the co-is	suer(s) other th	an the issuer named above	2.
Full legal name(s) of co-issuer(s)			(if applicable)		
leer of the service o			J		
ITEM 4 - UNDERWRITER INFORM					
If an underwriter is completing the report,	provide the underwriter's full le	gal name and firn	n NRD number.		٦
Full legal name					
Firm NRD number (if applicable)					
If the underwriter does not have a firm NF	D number, provide the head off	ice contact inform	ation of the un	derwriter.	_
Street address					
Municipality		Pro	ovince/State		
Country		Postal co	de/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 5 2 3 9 9 0					
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					
☐ Cryptoassets					
b) Number of employees					
Number of employees: ✓ 0 - 49					
c) SEDAR profile number					
Does the issuer have a SEDAR profile?					
No ✓ Yes If yes, provide SEDAR profile number 0 0 0 2 6 5 6 7					
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.					
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 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	☐ \$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 inves	tment 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 mand	ager 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						
Type of investment fund tha	nt most accurately identifies the issuer (select only one) .						
☐ Money market	☐ Equity ☐ Fixed income ☐ Balanced						
Alternative strateg	jies Cryptoasset Other (describe)						
	h of the following apply to the investment fund .						
Invests primarily ir	n other investment fund issuers						
☐ Is a UCITs Fund¹							
¹ Undertaking for the Collec (EU) directives that allow c	tive Investment of Transferable Securities funds (UCITs Funds) are investment funds regulated by the European Union ollective investment schemes to operate throughout the EU on a passport basis on authorization from one member state.						
c) Date of formation a	nd financial year-end of the investment fund						
Date of format	Financial year-end MM DD MM DD						
d) Reporting issuer st	atus of the investment fund						
Is the investment fund a rep	orting issuer in any jurisdication of Canada? No Yes						
If yes, select the jurisdictions	s of 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 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 name of the exchange on which the investment fund's 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						
f) Net asset value (NA	AV) 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 \$500	DM \$500M to under \$1B \$1B or over Date of NAV calculation:						

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, cac.				
Select the currency or cur	rencies in which the dist	ribution was made. A	All dollar amounts provided in	the report must be in Canadian dollars.
✓ Canadian dollar	US dollar	Furo	Other (describe)	

b) Distribution date(s)

a) Currency

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	2021	01	15	End date	2021	01	15
	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 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 \$	
5	Security code	CUSIP number (if applicable)	Description of security	Number of securities	Single or lowest price	Highest price	Total amount
L	ВЅ		Each Unit consists of one share and one warrant.	40,000,000.00	0.0750		3,000,000.02

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.

exch	nvertib nangea urity c	able		Underlying Exercise price (Canadian \$)		Expiry date (YYYY- MM-DD)	Conversion ratio	Describe other items (if applicable)		
						Lowest	Highest			
W	Ν	Т	С	М	S	0.1500		2023-01-15		

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 ² purchasers	Total amount (Canadian \$)
Alberta	NI 45-106 2.3 [Accredited investor]	1	15,000.00
British Columbia	NI 45-106 2.3 [Accredited investor]	8	298,499.93
British Columbia	NI 45-106 2.5 [Family, friends and business associates]	2	69,500.03
Ontario	NI 45-106 2.3 [Accredited investor]	9	1,642,500.08
Cayman Islands	NI 45-106 2.3 [Accredited investor]	2	363,999.98
Mexico	NI 45-106 2.3 [Accredited investor]	1	375,000.00
United Kingdom	NI 45-106 2.3 [Accredited investor]	1	228,000.00

Bahamas	NI 45-106 2.3 [Accredited investor]	1	7,500.00
	Total dollar amount of se	3,000,000.02	
	Total number of unique purchasers ^{2b}	25	

^{2a} In calculating the number of unique purchasers per row, count each purchaser only once. Joint purchasers may be counted as one 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)		

^{2b} 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.

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 ✓ Yes If yes, indicate number of persons compensated. 2								

a) Name of person compensated and registration status								
Indicate whether the person compensated is a registrant. V No Yes								
If the person compensated is an individual, provide the name of the individual.								
Full legal name of individual								
		Family name	Firs	st given name	e	Secondary of	jiven names	
If the person compensated is n	ot an individual, pro	vide the following info	rmation.					
Full legal name of non-individual Lightstream Ltd.								
Firm NRD number (if applicable)								
Indicate whether the person compensated facilitated the distribution through a funding portal or an internet-based portal. V No Yes								
b) Business contact info	rmation							
If a firm NRD number is not pr	ovided in Item 8 (a),	provide the business o	ontact information	n of the pers	son being com	pensated.		
Street address	13 Genesis Cl. 4	th Floor						
Municipality	Georgetown			Prov	/ince/State			
Country	Cayman Islands		F	Postal cod	e/Zip code	KY19006		
Email address	dain.currie@gma	ail.com		Telepho	ne number			
c) Relationship to issuer	or investment fur	nd 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 m	anager \square	Employee	of the issuer o	r investment fun	d manager	
✓ None of the above			·					
d) Compensation details								
Provide details of all compensa Canadian dollars. Include cash incidental to the distribution, st allocation arrangements with the Cash commissions p	tion paid, or to be po commissions, securio uch as clerical, printi he directors, officers	ties-based compensations, legal or accounting	on, gifts, discounts 1 services. An issue	or other co er is not requ	mpensation. Duired to ask for he issuer.	o not report payı details about, or	ments for services	
Odon commissions p				Sec	T 1 	Security code 2	Security code 3	
Value of all securiti distributed as compensation	1 160 1	524.98	Security codes	U	BS			
Describe terms of warrants, options or other rights 2,140,333 finder's units. Each finder's Unit consists of one share and one warrant exercisable into share at \$0.015 on or before January 15, 2023.								
Other compensation	on ⁵	Describe						
Total compensation paid 160,524.98								
Check box if the person will or may receive any deferred compensation (describe the terms below)								
⁴ Provide the aggregate value additional securities of the iss rights exercisable to acquire a ⁵ Do not include deferred com	ruer. Indicate the sec additional securities	curity codes for all sec						

a) Name of person comp	pensated and regi	stration status							
Indicate whether the person co	mpensated is a regis	trant.	✓ No] Yes				
If the person compensated is a	n individual, provide	the name of the indi	vidual.						
Full legal name of indi	vidual								
		Family name		First given	name		Secondary (given names	
If the person compensated is n	ot an individual, prov	vide the following inf	ormation.						
Full legal name of non-individual Regents Park Securities									
Firm NRD number (if applicable)									
Indicate whether the person co	mpensated facilitated	d the distribution thr	ough a funding	g portal or a	n internet-	based po	ortal.	No [Yes
b) Business contact info	rmation								
If a firm NRD number is not pr	ovided in Item 8 (a),	provide the business	contact inform	nation of the	person be	ing com	pensated.		
Street address	77 New Cavendis	sh Street							
Municipality	London			I	Province/	State			
Country	United Kingdom			Postal	code/Zip	code	W1W 6XB		
Email address	trading@rpsec.co	o.uk		Tele	phone nu	ımber	44203515560	00	
c) Relationship to issuer	or investment fun	d manager							
Indicate the person's relationsh the Instructions and the meani Connect with the issu	ng of "control" in sec	tion 1.4 of NI 45-10	-	ses of comp	leting this :	section.	ning of "connecter		
_						,		,	
Director or officer of	ine invesiment iund	or investment lund	nanager	Embio	yee or the	issuer o	r investment fun	u manager	
✓ None of the above									
d) Compensation details									
Provide details of all compensa Canadian dollars. Include cash incidental to the distribution, su allocation arrangements with the Cash commissions p	commissions, securiti ich as clerical, printin he directors, officers o	ies-based compensa ng, legal or accountir	tion, gifts, disco ng services. An	ounts or othe issuer is not	er compens required t	sation. D o ask for	o not report payı	ments for se	ervices
Cash commissions p	alu				Security c	ode 1	Security code 2	Security co	ode 3
Value of all securiti distributed as compensation	1057	50.00	Security cod	es	U B	S			
Describe terms of warrants, options or other rights 1,410,000 finder's units. Each finder's Unit consists of one share and one warrant exercisable into share at \$0.015 on or before January 15, 2023.									
Other compensation	on ⁵	Describe	•						
Total compensation pa	aid 105,7	50.00							
Check box if the person will or may receive any deferred compensation (describe the terms below)									
⁴ Provide the aggregate value additional securities of the iss rights exercisable to acquire a ⁵ Do not include deferred comp	uer. Indicate the sec additional securities o	rurity codes for all se							<i></i> ər

тем 9 - Directors, Execu	TIVE OFFICERS	AND PROMOT	ERS OF THE ISS	UER					
If the issuer is an investment fund, do not complete Item 9. Procced to Item 10.									
Indicate whether the issuer is any o	f the following (select	t the one that appli	es - if more than one	applies, select onl	y one).				
✓ Reporting issuer in any juris	sdiction of Canada								
Foreign public issuer									
Wholly owned subsidiary of	a reporting issuer in	any jurisdiction of	Canada ⁶						
Provide nan	ne of reporting issue	r							
Wholly owned subsidiary of	a foreign public issu	ıer ⁶						_	
Provide name of	foreign public issue	r						7	
Issuer distributing only eligil	ble foreign securities	and the distribution	on is to permitted clie	ents only ⁷				_	
If the issuer is at least one of the	above, do not comp	olete 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 officer Provide the following information for			motor of the issuer F	For locations within	Canada s	tata tha	province	or	
territory; otherwise state the country.						tate the	province	OI .	
Organization or company name	Business location of non-individual or residentail (select all that apply)								
				Province or	country	D	0	Р	
b) Promoter information									
If the promoter listed above is not an	individual provide t	he following inform	nation for each direct	or and executive o	fficer of the	nromot	er For lo	cations	
within Canada, state the province or									
Organization or company name Family name First given name Residential jurisdiction of individual Relationship to promoter (select one or both if applicable)									
		_		Province or country	D		C)	
c) Residential address of each individual									
Complete Schedule 2 of this form	providing the full r	esidential address	for each individua	ıl listed in Item 9	(a) and (h)	and at	tach to t	he	

 $completed\ report.\ Schedule\ 2\ also\ requires\ information\ to\ be\ provided\ about\ control\ persons.$

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 exemt 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	Rockshield Capital Corp.						
Full legal name	DeMare Nick						
	Family name	First given name		;	Seconda	ary given na	ames
Title	Chief Financial Officer						
Telephone number	6046859316	Email address	ndem	are@	chaser	ngt.com	
Signature	"Nick DeMare"	Date	202	1	01	21	
			YYY	Y	MM	DD	

ITEM 11- CONTACT P	PERSON				
	ness contact information for this report, if different than t			regulator m	ay contact with any questions
Same as individua	Il certifying the report				
Full legal name				Title	
	Family name	First given name	Secondary given names		_
Name of company					
Telephone number		Er	nail 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 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.