Form 45-106F1 Report of Exempt Distribution

BCSC EDER Reference Number 9380380

ITEM 1 - REPORT TYPE											
✓ New report											
Amended report If amended, provide filing date of report that is being amended (YYYY-MM-DD)											
ITEM 2 - PARTY CERTIF	YING TH	ie Repor	т								
Indicate the party certifying th Instrument 81-106 Investment									restment fund	, refer to secti	on 1.1 of National
Investment fund	issuer										
✓ Issuer (other that	n an inve	stment fu	nd)								
ITEM 3 - ISSUER NAME											
Provide the following informat						ment fu	ınd, abou	it the fund.]
	•	gal name Litelink Technologies Inc.									
Previous full legal name											
If the issuer's name changed in the last 12 months, provide most recent previous legal name.											
	Website	Website (if applicable)									
If the issuer has a legal entity	If the issuer has a legal entity identifier, provide below. Refer to Part B of the Instructions for the definition of "legal entity identifier".										
Legal entity	v identifier										
If two or more issuers distribut	ed a single	security, pro	vide the	e full legal	name	(s) of th	e co-issue	er(s) other th	an the issuer	named above	<u>}.</u>
Full legal name(s) of co-issuer(s) (if applicable)											
ITEM 4 - UNDERWRITER	r Infor	MATION									
If an underwriter is completing	the report	, provide the	underw	vriter's full	legal	name a	nd firm N	NRD number.			_
Full legal name											
Firm NRD number					(if applicable)						
If the underwriter does not hav	If the underwriter does not have a firm NRD number, provide the head office contact information of the underwriter.										
Street address]
Municipality							Provi	ince/State]
Country	·				Ī	Pos	tal code	e/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 1 8 2 1 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 🗌 50 - 99 🗌 100 - 499 🗌 500 or more
c) SEDAR profile number
Does the issuer have a SEDAR profile?
No✓ YesIf yes, provide SEDAR profile number00031244
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
YYYY 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 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
S100M to under \$500M	S500M to under \$1B	S1B or over

If the issue is an investment fund, provide the following information: a) Investment fund manager information Full legal name Furn NRD number 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 Guntry Postal code/Zip code Telephone number D Type of investment fund Tree of investment fund that most accurately identifies the issuer (select only one). Alternative strategies Cryptoasset Other (describe) Indicate whether one or both of the following apply to the investment fund. Investment fund that most accurately identifies the issuer (select only one). Alternative strategies Cryptoasset Other (describe) Indicate whether one or both of the following apply to the investment fund. Investment fund that most accurately identifies the issuer (select only one). Indicate whether one or both of the following apply to the investment fund. Investment fund issuers Is a UCIT's Fund' 'understaining for the Collective Investment fund issuers Is a UCIT's Fund' 'understaining for the Collective Investment of Transferable Securities funds (UCIT's Funds) are investment funds regulated by the European Union (C) Date of formation and financial year-end of the investment fund Suppresent fund a reporting issuer in any jurisdication of Canada? No Yes It he investment fund a reporting issuer in any jurisdication of Canada? No Yes It he investment fund hars a CUSP number, provide below (first 6 digits only) CUSP number On O Public listing status of the investment fund is a reporting issuer. All All All </th
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
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 County Postal code/Zip code County Telephone number Postal code/Zip code Do Type of investment fund Type of investment fund Type of investment fund that most accurately identifies the issuer (select only one). Do Type of investment fund that most accurately identifies the issuer (select only one). Do Money market De Quity De County De C
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CUSIP number
name of an exchange and not a trading facility such as, for example, an automated trading system
Exchange name
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 \$).
L L \$\the under \$\mathbf{S}M \qquad L \qquad \mathbf{S}M \text{ to under \$\mathbf{S}M \qquad \text{ to under \$\mathbf{S}M \qquad \text{to under \$\mathbf{S}M
\$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:

ITEM 7 - INFORMATION ABOUT THE DISTRIBUTION

purchasers resident in that jurisdie	nada completes a distribution in a juris ction of Canada only. Do not include in which must be disclosed in Item 8. The	n Item 7 securities issu	ed as payment of c	commissions or fi	inder's fees in					
a) Currency										
Select the currency or currencies i	n which the distribution was made. All	dollar amounts provid	ded in the report m	ust be in Canadi	an dollars.					
✓ 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 dat	^{te} 2021 02 12	End da	ate 2021	02 12						
	YYYY MM DD		YYYY	MM DD						
c) Detailed purchaser infor										
Complete Schedule 1 of this	s form for each purchaser and a	ttach the schedule	to the complet	ed report.						
d) Types of securities distr	ibuted									
	n for all distributions reported on a per SIP number, indicate the full 9-digit Cl				ow to indicate the					
		1		Canadian \$	5					
Security code (if applicable)	Description of security	Number of securities	Single or lowest price	Highest price	Total amount					
C M S 53677L203 Com	nmon Shares	10,050,000.0	0 0.1000		1,005,000.00					
e) Details of rights and cor	nvertible/exchangeable securities									
were distributed, provide the con	ns) were distributed, provide the exercis version ratio and describe any other te				exchangeable securities					
Convertible / exchangeable Underlying security code security code	Exercise price (Canadian \$) Lowest Highest	(Canadian \$) (YYYY- MM-DD) ratio			Describe other items (if applicable)					
f) Summary of the distribut	tion by jurisdiction and exemption	L	ł							
purchaser resides and for each ex distribution in a jurisdiction of Ca This table requires a separate line purchaser resides, if a purchaser r jurisdiction.	ecurities distributed and the number of emption relied on in Canada for that c inada, include distributions to purchase e item for: (i) each jurisdiction where a resides in a jurisdiction of Canada, and tate the province or territory, otherwise	listribution. However, i ers resident in that juri purchaser resides, (ii) e l (iii) each exemption re	if an issuer located sdiction of Canada each exemption rel	outside of Canad only. ied on in the juri	da completes a sdiction where a					
Province or country	Exemption relied o	'n	Number of unique ² purchasers	²⁹ Total a	mount (Canadian \$)					
British Columbia	NI 45-106 2.3 [Accredited inv	estor]		27	785,000.00					
Germany	NI 45-106 2.3 [Accredited inv	estor]		1	30,000.00					
Luxembourg	NI 45-106 2.3 [Accredited inv	estor]		1	75,000.00					
Ontario	NI 45-106 2.3 [Accredited inv	estor]		1	25,000.00					
Paraguay	NI 45-106 2.3 [Accredited inv	estor]		1	40,000.00					
Switzerland	NI 45-106 2.3 [Accredited inv	estor]		1	50,000.00					
	Tota	I dollar amount of se	curities distribut	ed	1,005,000.00					
	Total number of u	unique purchasers ^{2b}		32						
			``````````````````````````````````````							

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

^{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.

#### 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 \$)
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)

ITEM 8 - COMPENSATION	NFORMATION						
Provide information for each person the distribution. <b>Complete addition</b>							nsation in connection with
Indicate whether any compensation	on was paid, or will be po	aid, in connecti	on with the dis	tribution	).		
🗌 No 🗹 Yes	If yes, indicate nun	nber of perso	ns compens	ated.	2		
a) Name of person compens	sated and registration	status					
Indicate whether the person compe	nsated is a registrant.		🗌 No	V	Yes		
If the person compensated is an inc	lividual, provide the nam	e of the individ	lual.				
Full legal name of individu	al						
	Family n	ame		First giver	name	Sec	condary given names
If the person compensated is not ar		-					
Full legal name of	non-individual Hayw	ood Securitie	es Inc.				
Firm	NRD number 1	6 3	0		(if a	applicable)	
Indicate whether the person compe	nsated facilitated the dis	tribution throu	gh a funding p	ortal or	an internet-bas	ed portal.	✓ No 🗌 Yes
b) Business contact informa	tion						
If a firm NRD number is not provid	ed in Item 8 (a), provide	the business co	ntact informa	tion of th	e person being	compensated	
Street address							
Municipality					Province/Sta	te	
Country				Posta	l code/Zip coo	le	
Email address				Tele	ephone numb	er	
c) Relationship to issuer or i	nvestment fund mana	ager					
Indicate the person's relationship w the Instructions and the meaning o							connected" in Part B(2) of
Connect with the issuer of	or investment fund mana	iger		Inside	er of the issuer	(other than a	n investment fund)
Director or officer of the i	nvestment fund or inves	tment fund ma	nager	] Empl	oyee of the issu	uer or investn	nent fund manager
$\checkmark$ None of the above							
d) Compensation details							
Provide details of all compensation Canadian dollars. Include cash com incidental to the distribution, such a allocation arrangements with the di	missions, securities-base s clerical, printing, legal rectors, officers or emplo	d compensation or accounting	n, gifts, discoui services. An iss	nts or oth uer is no	ner compensation of required to as	on. Do not rep	oort payments for services
Cash commissions paid	6,000.00				Security code	1 Security	code 2 Security code 3
Value of all securities distributed as compensation ⁴		S	ecurity codes				
Describe term	s of warrants, options o	r other rights					
Other compensation ⁵		Describe					
Total compensation paid	6,000.00						
Check box if the person	n will or may receive any	/ deferred com	pensation (de	scribe th	ne terms below)		
⁴ Provide the aggregate value of al							
additional securities of the issuer. rights exercisable to acquire addit			rities distribut	ed as co	mpensation, <u>in</u>	<u>cluding</u> option	ns, warrants or other
⁵ Do not include deferred compens							

a) Name of person comp	ensated and regist	ration status							
Indicate whether the person con	npensated is a registro	int.	No No	$\checkmark$	Yes				
If the person compensated is an	individual, provide th	e name of the indiv	idual.						
Full legal name of indiv	idual								
	Fa	amily name	Fi	rst given na	ame		Secor	dary given	names
If the person compensated is no	-	-							
Full legal name	of non-individual	PI Financial Corp							
Fi	rm NRD number	5 2 9	0			(if appli	icable)		
Indicate whether the person con	npensated facilitated t	the distribution thro	ugh a funding po	rtal or an	internet	-based p	ortal.	V No	o 🗌 Yes
b) Business contact infor	mation								
If a firm NRD number is not pro	vided in Item 8 (a), pr	ovide the business o	ontact informatio	on of the p	person be	eing com	pensated.		
Street address									
Municipality				Р	rovince	/State			
Country				Postal c	ode/Zip	code			
Email address				Telepl	hone nı	umber			
c) Relationship to issuer	or investment fund	manager	<b>_</b>						
Indicate the person's relationshi the Instructions and the meaning							ning of "cor	nnected" in	Part B(2) of
Connect with the issu	-		, , , , , , , , , , , , , , , , , , ,	-	-		er than an i	nvestment	fund)
Director or officer of th	ne investment fund or	investment fund m	anager	Employ	ee of the	e issuer o	or investme	nt fund ma	nager
✓ None of the above									-
d) Compensation details									
Provide details of all compensate Canadian dollars. Include cash c incidental to the distribution, suc allocation arrangements with th	ommissions, securities h as clerical, printing,	-based compensation legal or accounting	on, gifts, discount 1 services. An issu	s or other er is not r	compen equired t	sation. D to ask for	o not repor	t payment:	s for services
Cash commissions pa	id 5,400	0.00			Security of	code 1	Security coo	de 2 Sec	urity code 3
Value of all securitie distributed as compensatio	-		Security codes						
	erms of warrants, opti	ions or other rights							
Other compensation	Ŋ ⁵	Describe							
Total compensation pa	id 5,400	0.00	L						
Check box if the pe	son will or may recei	ve any deferred co	mpensation (des	cribe the	terms be	elow)			
⁴ Provide the aggregate value of additional securities of the issurights exercisable to acquire ad ⁵ Do not include deferred comp	er. Indicate the secur Iditional securities of	ity codes for all sec							

ITEM 9 - DIRECTORS, EXECU	TIVE OFFICERS	AND PROMOT	ERS OF THE ISS	SUER						
If the issuer is an investment fund	d, do not complete	Item 9. Procced to	Item 10.							
Indicate whether the issuer is any o	f the following (seled	ct the one that appli	es - if more than one	applies, select onl	y one).					
<ul><li>Reporting issuer in any juris</li></ul>	sdiction of Canada									
Foreign public issuer										
Wholly owned subsidiary of	a reporting issuer i	n any jurisdiction of	Canada ⁶							
Provide nar	ne of reporting issue	ər						]		
Wholly owned subsidiary of	a foreign public iss	suer ⁶								
Provide name of	f foreign public issue	er								
Issuer distributing only eligi	ble foreign securitie	s and the distributio	n is to permitted clie	ents only ⁷						
If the issuer is at least one of the	above, do not com	plete 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.										
a) Directors, executive officer	s and promoters	of the issuer								
Provide the following information for territory; otherwise state the country.						tate the	province	or		
Organization or company name	Family name	First given name	Secondary given names	Business loc non-individu resident jurisdictio individu	ual or ail n of	Relationship to issuer (select all that apply)				
				Province or	country	D	0	Р		
b) Promoter information										
If the promoter listed above is not ar within Canada, state the province or										
Organization or company name	Family name	First given name	Secondary given names	Residential jurisdiction of individual		ationship to promoter one or both if applicable				
				Province or	D		C			
				country						
				country						

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 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	LiteLink Technologies Inc.								
Full legal name	Green								
	Family name First given name			Secondary given names					
Title	Chief Executive Officer								
Telephone number	6043145675	Email address	address pgreen@litelinkted						
Signature	Peter Green Date		2021	02	22				
			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	Johnson	Saundra			Title	Paralegal
	Family name	First given name	Secondary	given names		
Name of company	Cassels Brock & Blackw	vell LLP				
Telephone number	7783727659	En	nail address	sjohnson@c	assels.c	om

#### 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.