Form 45-106F1 Report of Exempt Distribution

BCSC EDER Reference Number 9410881

ITEM 1 - REPORT TYPE					
✓ Amended report If	f amended, provide f	iling date of report th	at is being ame	ended 2021 03 19	(YYYY-MM-DD)
ITEM 2 - PARTY CERTIFYIN	IG THE REPORT				
Indicate the party certifying the rep				restment fund, refer to section	on 1.1 of National
Instrument 81-106 Investment Fun		na the companion policy to	INI 01-100.		
✓ Issuer (other than an					
Underwriter	i ilivesiment idila)				
☐ Onderwriter					
ITEM 3 - ISSUER NAME AN	ID OTHER IDENTIFIE	RS			
Provide the following information of	about the issuer, or if the is	suer is an investment fund	about the fund.		
Full legal	name Vibe Growth	Corporation			
Previous full legal name					
If the issuer's name change	ed in the last 12 months, p	rovide most recent previou	s legal name.		
Website (if applicable)					
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 ide	entifier				
If two or more issuers distributed a	single security, provide the	e full legal name(s) of the c	 o-issuer(s) other th	an the issuer named above.	
Full legal name(s) of co-iss	suer(s)		(if applicabl	e)	
ITEM 4 - UNDERWRITER IN	IFORMATION				
If an underwriter is completing the	report, provide the underw	riter's full legal name and	firm NRD number.		1
Full legal name					
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					
Municipality			Province/State		
Country		Postal	code/Zip code		
Telephone number			Website		(if applicable)

Primary industry	Item 5 - Issuer Information
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	If the issuer is an investment fund, do not complete Item 5. Proceed to Item 6.
Corresponds to the issuer's primary business activity. NaICS industry code	a) Primary industry
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 Number of employees	
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	NAICS industry code 4 5 3 9 9 3
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	mining industry. Select the category that best describes the issuer's stage of operations.
Mortgages Real estate Commercial/business debt Consumer debt Private companies	
Cryptoassets b) Number of employees 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 3 2 1 5 0 If the issuer does not have SEDAR profile complete item 5(d) - (h). d) Head office address Street address Municipality Postal code/Zip code Country Telephone number e) Date of formation and financial year-end Date of formation Financial year-end 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. All AB BC MB NB NB NL NT NS NU ON PE QC SK YT	b) Number of employees
Does the issuer have a SEDAR profile? No Yes If yes, provide SEDAR profile number 0 0 0 3 2 1 5 0 If the issuer does not have SEDAR profile complete item 5(d) - (h). d) Head office address Street address Municipality Country Postal code/Zip code Telephone number e) Date of formation and financial year-end Date of formation	Number of employees: ☐ 0 - 49
No Yes If yes, provide SEDAR profile number 0 0 0 3 2 1 5 0 If the issuer does not have SEDAR profile complete item 5(d) - (h). d) Head office address Street address Province/State Postal code/Zip code Postal code/Zip code	c) SEDAR profile number
If the issuer does not have SEDAR profile complete item 5(d) - (h). d) Head office address Street address Province/State Municipality Country Telephone number e) Date of formation and financial year-end Date of formation The postal code/Zip code Telephone number Financial year-end 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. All AB BC MB NB NB NL NT NS NU ON PE QC SK YT	Does the issuer have a SEDAR profile?
Street address	No ✓ Yes If yes, provide SEDAR profile number 0 0 0 3 2 1 5 0
Street address	
Municipality Country Postal code/Zip code Telephone number Date of formation and financial year-end Date of formation YYYY MM DD Financial year-end 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. All AB BC MB NB NL NT NS NU ON PE QC SK YT	d) Head office address
Country Telephone number Date of formation and financial year-end Date of formation YYYY MM DD Financial year-end MM DD MM DD The phone number Financial year-end YYYY MM DD Financial year-end YYYY MM DD The phone number Financial year-end MM DD The phone number The	Street address Province/State
e) Date of formation and financial year-end Date of formation	Municipality Postal code/Zip code
Date of formation	Country Telephone number
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. All AB BC MB NB NL NT NS NU ON PE QC SK YT	e) Date of formation and financial year-end
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. All AB BC MB NB NL NT NS NU ON PE QC SK YT	
If yes, select the jurisdictions of Canada in which the issuer is a reporting issuer. All AB BC MB NB NL NT NS NU ON PE QC SK YT	f) Reporting issuer status
AII AB BC MB NB NL NT NS NU ON PE QC SK YT	Is the issuer a reporting issuer in any jurisdication of Canada? No Yes
NS NU ON PE QC SK YT	If yes, select the jurisdictions of Canada in which the issuer is a reporting issuer.
	AII AB BC MB NB NL NT
g) Public listing status	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	Exchange name
h) Size of issuer's assets	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 ma	anager information				
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	gies Cryptoasset Other (describe)				
Indicate whether one or bot	h of the following apply to the investment fund .				
Invests primarily in	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 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 Financial year-end MM DD MM DD					
d) Reporting issuer status of the investment fund					
Is the investment fund a reporting issuer in any jurisdication of Canada? No Yes					
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	s 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 on an exchange and h					
-	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	s5M to under \$25M s25M to under \$100M				
\$100M to under \$500	DM \$500M to under \$1B \$1B or over Date of NAV calculation: YYYY MM DD				

ITEM 7 - INFORMATION ABOUT THE DISTRIBUTION

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

a)	Currency
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.

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 2021 03 16

End date 2021 03 16

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 \$	
3	Security code (if applicable)		CUSIP number (if applicable)	Description of security	Number of securities	Single or lowest price	Highest price	Total amount
L	В	S		Each Unit is comprised of 1 CMS and one half of 1 common share purchase warrant	19,864,750.00	0.8200	0.8200	16,289,095.00

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.

ex	onverti change curity	eable			derlyir urity c	•	Exercise price (Canadian \$)		Expiry date (YYYY- MM-DD)	Conversion ratio	Describe other items (if applicable)
							Lowest Highest				
W	N	Т	-	С	М	S	1.0600	1.0600	2024-03-16		1 WNT entitles the holder to purchase 1 CMS

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 ²⁸ purchasers	Total amount (Canadian \$)
Cayman Islands	Distributions to purchasers outside of local jurisdiction (BC, AB, NB)	5	6,473,900.00
Alberta	NI 45-106 2.3 [Accredited investor]	8	1,601,050.00
Québec	NI 45-106 2.3 [Accredited investor]	4	1,425,980.00
Ontario	NI 45-106 2.3 [Accredited investor]	26	5,061,655.00
British Columbia	NI 45-106 2.3 [Accredited investor]	13	1,109,870.00
Saskatchewan	NI 45-106 2.3 [Accredited investor]	1	16,400.00

United Kingdom	Distributions to purchasers outside of local jurisdiction (BC, AB, NB)	1	20,500.00
Germany	Distributions to purchasers outside of local jurisdiction (BC, AB, NB)	1	98,400.00
Netherlands	Distributions to purchasers outside of local jurisdiction (BC, AB, NB)	1	24,600.00
Mexico	Distributions to purchasers outside of local jurisdiction (BC, AB, NB)	1	9,020.00
Switzerland	Distributions to purchasers outside of local jurisdiction (BC, AB, NB)	1	20,500.00
China	Distributions to purchasers outside of local jurisdiction (BC, AB, NB)	1	50,020.00
United States	Distributions to purchasers outside of local jurisdiction (BC, AB, NB)	3	377,200.00
	16,289,095.00		

^{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)	Date previously filed or delivered (YYYY-MM-DD)

^{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.

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 V Yes If yes, indicate number of persons compensated.	ITEM 8 - COMPENSATION INFORMATION
No ✓ Yes If yes, indicate number of persons 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. 4

a) Name of person comper	nsated and regis	tration status										
Indicate whether the person comp	ensated is a registr	ant.		☐ No		\checkmark	Yes					
If the person compensated is an ir	ndividual, provide ti	he name of the i	ndivid	lual.								
Full legal name of individ	ual											
	F	amily name			First	given i	name		Se	condary gi	ven name	es
If the person compensated is not o	ın individual, provi	de the following	infori	mation.								
Full legal name of	non-individual	Mackie Resea	arch (Capital C	orpora	ition						
Firn	n NRD number	3 0	7	0				(if app	olicable)			
Indicate whether the person compensated facilitated the distribution through a funding portal or an internet-based portal.												
b) Business contact inform	b) Business contact information											
If a firm NRD number is not provi	ded in Item 8 (a), p	rovide the busin	ess co	ntact info	rmation	of the	persor	being co	mpensated	1.		
Street address												
Municipality						F	Provin	ce/State				
Country					Р	ostal	code/2	Zip code				
Email address						Telep	ohone	number				
c) Relationship to issuer or	investment fund	l manager										
Indicate the person's relationship the Instructions and the meaning										connected	d" in Par	t B(2) of
Connect with the issuer			.00 /	,c pa.,p		-	-			an investr	nent fun	d)
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				Ü			,				J	
d) Compensation details												
Provide details of all compensation Canadian dollars. Include cash cor incidental to the distribution, such allocation arrangements with the d	nmissions, securitie as clerical, printing	rs-based comper n, legal or accoun	nsation nting :	n, gifts, dis services. A	counts (n issuer	or othe is not	er comp require	ensation. ed to ask f	Do not rep	oort paym	nents for	services
Cash commissions paid	34,44	0.00					Securi	ty code 1	Security	code 2	Security	code 3
Value of all securities distributed as compensation ⁴			S	Security co	odes		0	РТ				
Describe teri	ms of warrants, op	tions or other rig	ghts	42,000 CMS at	compe a price	nsation	n opti 0.82 p	ons allover share	wing the p	ourchase on Marc	e of 42, h 16, 2	000 024
Other compensation ⁵		Desc	ribe									
Total compensation paid	34,44	0.00										
Check box if the person	on will or may rece	ive any deferred	d com	pensation	(descri	ibe the	terms	below)				
⁴ Provide the aggregate value of a additional securities of the issuer rights exercisable to acquire add ⁵ Do not include deferred compen	r. Indicate the secu itional securities of	rity codes for all	nsatio I secu	n, <u>excludi</u> ırities disti	ing optio	ons, wa as com	arrants ipensa	or other i tion, <u>inclu</u>	rights exer I <u>ding</u> optio	cisable to ns, warra	acquire nts or o	ther

a) Name of person comper	nsated and registra	ation status						
Indicate whether the person comp	ensated is a registrai	nt.	☐ No	\checkmark	Yes			
If the person compensated is an in	ndividual, provide the	name of the indivi	dual.					
Full legal name of individ	ual							
	Fai	mily name	Firs	st given na	ame	Secor	ndary given name	
If the person compensated is not o	ın individual, provide	e the following info	rmation.					
Full legal name of	non-individual C	anaccord Genui	ty Corp					
Firm	n NRD number	9 0 0			(if ap	plicable)		
Indicate whether the person compensated facilitated the distribution through a funding portal or an internet-based portal.								
b) Business contact information	ation							
If a firm NRD number is not provid	ded in Item 8 (a), pro	vide the business c	ontact information	n of the p	erson being co	mpensated.		
Street address								
Municipality				Pr	rovince/State			
Country			F	Postal co	ode/Zip code			
Email address				Teleph	none number			
c) Relationship to issuer or	investment fund r	manager	_					
Indicate the person's relationship the Instructions and the meaning							nnected" in Part	B(2) of
Connect with the issuer					-		investment fund	1)
Director or officer of the	Director or officer of the investment fund or investment fund manager Employee of the issuer or investment fund manager							
None of the above			_				·	
d) Compensation details								
Provide details of all compensation Canadian dollars. Include cash con incidental to the distribution, such allocation arrangements with the d	nmissions, securities- as clerical, printing, l	based compensation	on, gifts, discounts services. An issue	or other r is not re	compensation equired to ask	. Do not repor	rt payments for s	services
Cash commissions paid	13,216	5.35			Security code 1	Security co	de 2 Security of	ode 3
Value of all securities distributed as compensation ⁴			Security codes	(O P T			
Describe terr	ms of warrants, optic	ons or other rights	16,118 compe CMS at a pric	ensation e of \$0.	options allo 82 per share	wing the pur	rchase of 16,1 March 16, 20	18
Other compensation ⁵		Describe	•		•			
Total compensation paid								
Check box if the person	on will or may receiv	re any deferred cor	npensation (desc	ribe the t	erms below)			
⁴ Provide the aggregate value of a additional securities of the issuer rights exercisable to acquire addi ⁵ Do not include deferred compen	. Indicate the securitional securities of the	ty codes for all sec	on, <u>excluding</u> opti urities distributed	ions, war as comp	rrants or other pensation, <u>incl</u>	rights exercis <u>uding</u> options,	able to acquire , warrants or oth	ner

a) Name of person comp	a) Name of person compensated and registration status							
Indicate whether the person co	mpensated is a regis	trant.	☐ No		✓ Yes			
If the person compensated is ar	individual, provide	the name of the indiv	ridual.					
Full legal name of indiv	ridual							
		Family name		First giv	ven name	Secondary given names		
If the person compensated is no	ot an individual, prov	vide the following info	ormation.					
Full legal name	of non-individual	Beacon Securitie	s Limited					
F	irm NRD number	1 5 5	4	0	(if a	applicable)		
Indicate whether the person compensated facilitated the distribution through a funding portal or an internet-based portal.								
b) Business contact infor	mation							
If a firm NRD number is not pro	ovided in Item 8 (a),	provide the business o	contact info	mation of	the person being	compensated.		
Street address								
Municipality					Province/Sta	te		
Country				Pos	stal code/Zip cod	de		
Email address				Te	elephone numb	er		
c) Relationship to issuer	or investment fun	d 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 issu	er or investment fur	nd manager		Ins	sider of the issuer	(other than an investment fund)		
Director or officer of t	he investment fund	or investment fund m	nanager	Em	nployee of the iss	uer or investment fund manager		
✓ None of the above								
d) Compensation details								
Canadian dollars. Include cash o	commissions, securit ch as clerical, printir	ies-based compensati ng, legal or accounting	on, gifts, dis g services. A	counts or o	other compensation of required to as	e distribution. Provide all amounts in on. Do not report payments for services ok for details about, or report on, internal		
Cash commissions pa		61.42		,	-	4 0		
Value of all securitie	,				Security code O P	1 Security code 2 Security code 3 T U B S		
distributed as compensatio	-		Security co	des				
Describe terms of warrants, options or other rights 1,155,306 compensation options allowing the purchase of 1,155,306 CMS at a price of \$0.82 per share expiring on March 16, 2024								
Other compensatio	Other compensation ⁵ 303,400.00 Describe 370,000 UBS each consisting of one CMS and one half of one WNT, each full WNT allowing the purchase of 1 CMS at a price of \$1.06 per share expiring on March 16, 2024							
Total compensation pa	id 922,8	61.42						
Check box if the pe	rson will or may rec	eive any deferred co	mpensation	(describe	e the terms below)	l		
^⁴ Provide the aggregate value of								
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 comp	a) Name of person compensated and registration status							
Indicate whether the person co	mpensated is a regis	trant.	☐ No	✓ Yes				
If the person compensated is ar	individual, provide	the name of the indiv	vidual.					
Full legal name of indiv	ridual							
		Family name		First given name	Secondary given names			
If the person compensated is no	ot an individual, prov	ride the following info	ormation.					
Full legal name	of non-individual	Haywood Securit	ties Inc.					
F	irm NRD number	1 6 3	0	(if	applicable)			
Indicate whether the person compensated facilitated the distribution through a funding portal or an internet-based portal.								
b) Business contact infor	mation							
If a firm NRD number is not pro	ovided in Item 8 (a),	provide the business	contact informa	tion of the person being	compensated.			
Street address								
Municipality				Province/Sta	ate			
Country			<u> </u>	Postal code/Zip co	de			
Email address			Ī	Telephone numb	per			
c) Relationship to issuer	or investment fun	d 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 issu	er or investment fur	nd manager		Insider of the issue	(other than an investment fund)			
Director or officer of t	he investment fund	or investment fund n	nanager	Employee of the iss	suer or investment fund manager			
✓ None of the above								
d) Compensation details								
Canadian dollars. Include cash o	commissions, securiti ch as clerical, printin	es-based compensati g, legal or accounting	ion, gifts, discou g services. An is:	nts or other compensati suer is not required to a	e distribution. Provide all amounts in on. Do not report payments for services sk for details about, or report on, internal			
Cash commissions pa		47.64		_	4 Conveity and 2 Conveity and 2			
Value of all securitie	es		O	Security code	1 Security code 2 Security code 3			
distributed as compensation			Security codes					
Describe terms of warrants, options or other rights 117,802 compensation options allowing the purchase of 117,802 CMS at a price of \$0.82 per share expiring on March 16, 2024								
Other compensatio	Other compensation ⁵ 31,160.00 Describe 38,000 UBS each consisting of 1 CMS and one half of one WNT entitling the owner to purchase 1 CMS at \$1.06 per share expiring on March 16, 2024.							
Total compensation pa	id 214,4	07.64						
Check box if the pe	rson will or may rec	eive any deferred co	mpensation (de	escribe the terms below)			
⁴ Provide the aggregate value of	of all securities distri	buted as compensat	tion, <u>e</u> xcludina d	options, warrants or oth	er rights exercisable to acquire			
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.								

тем 9 - Directors, Execu	TIVE OFFICERS	AND PROMOT	ERS OF THE ISS	SUER						
If the issuer is an investment fund	d, do not complete l	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 name of reporting issuer										
Wholly owned subsidiary of	a foreign public issu	uer ⁶						_		
Provide name of	foreign public issue	r						7		
Issuer distributing only eligil	ble foreign securities	and the distribution	n is to permitted clie	ents only ⁷				_		
If the issuer is at least one of the	above, do not comp	olete Item 9(a) – (d	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	s and promoters of	of the issuer								
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										
	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	Organization or company name Family name First given name Secondary given names Business location of non-individual or residentail jurisdiction of individual Relationship to issuer (select all that apply)									
				Province or	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 Residential jurisdiction of individual Relationship to promo (select one or both if app										
				Province or country	1 1 1		C)		
c) Residential address of each individual										
Complete Schedule 2 of this form completed report. Schedule 2 also					(a) and (b)	and at	tach to t	he		

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	Vibe Growth Corporation		
Full legal name	Holub		
	Family name	First given name	Secondary given names
Title	Chief Financial Officer		
Telephone number	8334208423	Email address mid	chalh@vibebycalifornia.com
Signature	/Michal Holub/ signed		021 03 19

TEM 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 individua	al certifying the report								
Full legal name	Bachewich	Brendan				Title	Lawyer		
	Family name	First given r	name	Secondary	given names				
Name of company	Pushor Mitchell LLP								
Telephone number	4036308504		Em	ail address	bachewic@u	ualberta.d	ca		

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.