# Form 45-106F1 Report of Exempt Distribution

BCSC EDER Reference Number 9398840

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	g the Report							
	ort (select only one). For guidance regarding whether an issuer is an investment fund, refer to section 1.1 of Nationa d Continuous Disclosure and the companion policy to NI 81-106.	l						
Investment fund i								
✓ Issuer (other than	investment fund)							
ITEM 3 - ISSUER NAME								
	bout the issuer, or if the issuer is an investment fund, about the fund.							
	name Cover Technologies Inc.							
Previous full legal name								
If the issuer's name changed in the last 12 months, provide most recent previous legal name.								
Website (if applicable)								
If the issuer has a legal entity i	ifier, provide below. Refer to Part B of the Instructions for the definition of "legal entity identifier".							
Legal entity	ntifier							
If two or more issuers distribut	single security, provide the full legal name(s) of the co-issuer(s) other than the issuer named above.							
Full legal name(s) of co	uer(s) (if applicable)							
ITEM 4 - UNDERWRITE	FORMATION							
	report, provide the underwriter's full legal name and firm NRD number.							
Full legal name								
Firm NRD number	D 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)							

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 2 1 2 2 9 9				
If the issuer is in the <b>mining industry</b> , 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 Ves If yes, provide SEDAR profile number 0 0 0 3 2 4 3 9				
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
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Date of formation Financial year-end   YYYY MM   Financial year-end MM MM DD  MM DD MM Pes MB
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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

TEM 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								
Select the currency or currencies in which the distribution was made. All dollar amounts provided in the report must be in Canadian 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 date         2021         02         26         End date         2021         02         26								
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 \$								
Security code         CUSIP number (if applicable)         Description of security         Number of securities         Single or lowest price         Highest price         Total amount								
U     B     S     22289X     Units. Each Unit consists of one common share and one share purchase warrant.     18,113,207.00     0.2650     4,799,999.86								
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.								
Convertible / exchangeable security code     Underlying security code     Exercise price (Canadian \$)     Expiry date (YYYY- MM-DD)     Conversion ratio       Lowest     Highest								
WNTCMS0.75001:1The Warrants may be accelerated by the Company if the closing price of its common shares is equal to or greater than \$1 for a period of 10 consecutive trading days. The Warrants will expire on the 30th day after the date on which a notice is given.								
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 <sup>28</sup> Total amount (Canadian \$)								

country	Exemption relied on	purchasers	Total amount (Canadian \$)
Bahamas	NI 45-106 2.3 [Accredited investor]	2	626,499.75
Barbados	NI 45-106 2.3 [Accredited investor]	2	270,479.67
Alberta	NI 45-106 2.3 [Accredited investor]	5	282,225.00

British Columbia	NI 45-106 2.3 [Accredited investor]	45	2,413,964.77	
British Columbia	NI 45-106 2.5 [Family, friends and business associates]	1	5,000.02	
Nova Scotia	NI 45-106 2.3 [Accredited investor]	2	55,350.02	
Ontario	NI 45-106 2.3 [Accredited investor]	19	873,605.89	
Québec	NI 45-106 2.3 [Accredited investor]	1	19,875.00	
Cayman Islands	NI 45-106 2.3 [Accredited investor]	1	53,000.00	
United States	United States NI 45-106 2.3 [Accredited investor]		199,999.74	
	Total dollar amount of securities distributed			

<sup>2a</sup> In calculating the number of unique purchasers per row, count each purchaser only once. Joint purchasers may be counted as one purchaser.

<sup>2b</sup> 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.<sup>3</sup> 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	

<sup>3</sup>"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)

Ітем 8 - Сс	OMPENSATIO	N INFORMATION	
		rson (as defined in NI 45-106) to whom the issuer directly provides, <b>litional copies of this page if more than one person was, or wil</b>	
Indicate when	ther any compens	ation was paid, or will be paid, in connection with the distribution.	
🗌 No	✓ Yes	If yes, indicate number of persons compensated.	5

5

a) Name of person compensated and registration status							
Indicate whether the person compensated is a registrant. No Ves							
If the person compensated is an individual, provide the name of the individual.							
Full legal name of individual							
	Family name	First (	given name	Secondary given names			
If the person compensated is not an individual, pro	vide the following infor	mation.					
Full legal name of non-individua	Haywood Securiti	es Inc.					
Firm NRD number 1 6 3 0 (if applicable)							
Indicate whether the person compensated facilitate	ed the distribution throu	ugh a funding porta	l or an internet-base	ed portal. 🖌 No 🗌 Yes			
b) Business contact information							
If a firm NRD number is not provided in Item 8 (a),	provide the business co	ontact information o	of the person being o	compensated.			
Street address							
Municipality			Province/Stat	e			
Country		Po	ostal code/Zip cod	e			
Email address		] -	Telephone numbe	er			
c) Relationship to issuer or investment fu	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 fu		· · ·		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							
d) Compensation details							
Provide details of all compensation paid, or to be p Canadian dollars. Include cash commissions, securi							
incidental to the distribution, such as clerical, printi	ng, legal or accounting	services. An issuer i	is not required to ask				
allocation arrangements with the directors, officers Cash commissions paid 60,	or employees of a non- 022.50	-inaiviauai compens	satea by the issuer.				
			Security code 1				
Value of all securities distributed as compensation <sup>4</sup>	Security codes						
Describe terms of warrants, options or other rights 226,500 broker warrants exercisable at \$0.75 per share until February 26, 2023, subject to an acceleration clause.							
Other compensation <sup>5</sup>	Describe						
Total compensation paid							
Check box if the person will or may receive any deferred compensation (describe the terms below)							
<sup>4</sup> Provide the aggregate value of all securities dist	ributed as comnensati	on. excludina ontior	ns. warrants or othe	r rights exercisable to acquire			
additional securities of the issuer. Indicate the se	curity codes for all sec						
rights exercisable to acquire additional securities of the issuer. <sup>5</sup> Do not include deferred compensation.							

a) Name of person compensated and registration status												
Indicate whether the person compensated is a registrant.												
If the person compensated is an individual, provide the name of the individual.												
Full legal name of individ	lual											
	F	amily name			First g	given na	ame		Seco	ndary giver	names	
If the person compensated is not	an individual, provid	de the followin	g infor	mation.								
Full legal name o	f non-individual	PI Financial	Corp.									
Firm NRD number 5 2 9 0 (if applicable)												
Indicate whether the person comp	pensated facilitated	the distributio	n throu	ıgh a fundi	ng portal	l or an	internet	t-based p	oortal.	✓ N	10	Yes
b) Business contact inform	nation											
If a firm NRD number is not provi	ided in Item 8 (a), pi	rovide the busi	iness co	ontact infor	mation o	of the p	person b	eing con	pensated.			
Street address												
Municipality						P	rovince	/State				
Country					Po	stal c	ode/Zip	o code				
Email address					٦	Telepł	hone ni	umber				
c) Relationship to issuer or	r investment fund	manager										
Indicate the person's relationship with the issuer or investment fund manager (select all that apply). Refer to the meaning of "connected" in Part B(2) of the Instructions and the meaning of "control" in section 1.4 of NI 45-106 for the purposes of completing this section.												
Connect with the issuer						-	-		er than an	investmer	nt fund)	
Director or officer of the	e investment fund o	r investment fu	und ma	anager	EI	mploy	ee of the	e issuer	or investme	ent fund m	anager	
✓ None of the above				-							-	
d) Compensation details												
Provide details of all compensation Canadian dollars. Include cash con incidental to the distribution, such	Provide details of all compensation paid, or to be paid, to the person identified in Item 8(a) in connection with the distribution. Provide all amounts in Canadian dollars. Include cash commissions, securities-based compensation, gifts, discounts or other compensation. Do not report payments for services incidental to the distribution, such as clerical, printing, legal or accounting services. An issuer is not required to ask for details about, or report on, internal allocation arrangements with the directors, officers or employees of a non-individual compensated by the issuer.											
Cash commissions paid	1					:	Security	code 1	Security co	ode 2 Se	curity code	e 3
Value of all securities distributed as compensation⁴	5 5 6	5.00	S	Security co	des		СМ	S				
Describe terms of warrants, options or other rights 21,000 broker shares issued at a deemed price of \$0.265 per share.												
Other compensation⁵		Des	cribe									
Total compensation paid	I											]
Check box if the person will or may receive any deferred compensation (describe the terms below)												
<sup>4</sup> 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. <sup>5</sup> Do not include deferred compensation.												

a) Name of person compensated and reg	stration status							
Indicate whether the person compensated is a regis	trant.	No No	✓ Yes					
If the person compensated is an individual, provide	the name of the indivi	idual.						
Full legal name of individual								
	Family name	First	given name	Secondary given names				
If the person compensated is not an individual, pro	vide the following info	rmation.						
Full legal name of non-individual	Canaccord Genui	ty Corp.						
Firm NRD number   9   0   0   (if applicable)								
Indicate whether the person compensated facilitated the distribution through a funding portal or an internet-based portal. Ves								
b) Business contact information								
If a firm NRD number is not provided in Item 8 (a),	provide the business c	ontact information	of the person being o	compensated.				
Street address								
Municipality		]	Province/Stat	e				
Country		Pc	ostal code/Zip cod	e				
Email address			Telephone numbe	Pr				
c) Relationship to issuer or investment fur	nd manager	_						
Indicate the person's relationship with the issuer or the Instructions and the meaning of "control" in sec								
Connect with the issuer or investment fu		· · ·		other than an investment fund)				
	-							
Director or officer of the investment fund	or investment lund m		Imployee of the issu	er or investment fund manager				
✓ None of the above								
d) Compensation details								
Provide details of all compensation paid, or to be po Canadian dollars. Include cash commissions, securit								
incidental to the distribution, such as clerical, printi	ng, legal or accounting	services. An issuer	is not required to ask					
allocation arrangements with the directors, officers		-individual compens	sated by the issuer.					
Cash commissions paid 46,8	324.99		Security code 1	Security code 2 Security code 3				
Value of all securities distributed as compensation <sup>4</sup>		Security codes	W N T					
Describe terms of warrants, c	ptions or other rights			able at \$0.75 per share until acceleration clause.				
Other compensation <sup>5</sup>	Describe		,,					
Total compensation paid								
Check box if the person will or may real	ceive any deferred cor	npensation (descril	be the terms below)					
<sup>4</sup> Provide the aggregate value of all securities distr	ibuted as compensati	on, excludina optio	ons, warrants or othe	r rights exercisable to acauire				
additional securities of the issuer. Indicate the sec rights exercisable to acquire additional securities	curity codes for all sec	urities distributed a	ns compensation, <u>inc</u>	luding options, warrants or other				
<sup>5</sup> Do not include deferred compensation.								

a) Name of person comper	nsated and regis	tration status								
Indicate whether the person comp	ensated is a registr	ant.	No No	$\checkmark$	Yes					
If the person compensated is an in	dividual, provide ti	he name of the indiv	idual.							
Full legal name of individ	ual									
	F	amily name	Fi	rst given n	ame		Secon	idary given r	names	I
If the person compensated is not a	ın individual, provi	de the following info	rmation.							
Full legal name of	non-individual	Mackie Research	Capital Corpo	ration						
Firm NRD number   3   0   7   0   (if applicable)										
Indicate whether the person compensated facilitated the distribution through a funding portal or an internet-based portal.										
b) Business contact informa	ation									
If a firm NRD number is not provid	ded in Item 8 (a), p	rovide the business o	contact informatio	on of the p	person b	eing com	pensated.			
Street address										
Municipality				Р	rovince	/State				
Country			Ī	Postal c	code/Zip	code				
Email address			Ī	Telep	hone nu	umber				
c) Relationship to issuer or	investment fund	manager								
Indicate the person's relationship the Instructions and the meaning							ning of "con	nected" in	Part B(2) of	
Connect with the issuer					-		er than an ir	nvestment	fund)	
		-							,	
Director or officer of the	investment fund o	r investment tuna m	nanager	Employ	ee of the	e issuer c	or investmer	nt tund mai	nager	
✓ None of the above										
d) Compensation details										
Provide details of all compensatior Canadian dollars. Include cash con incidental to the distribution, such allocation arrangements with the c	nmissions, securitie as clerical, printing	s-based compensati , legal or accounting	on, gifts, discount 7 services. An issu	ts or other er is not r	r compen required	isation. D to ask for	o not report	t payments	for services	
Cash commissions paid	52,78	8.00			Security	odo 1	Security cod	10.2 500	urity code 3	
Value of all securities			Security codes		W N	T		le 2 Sect		
distributed as compensation <sup>4</sup>	ms of warrants, op	tions or other rights	199,200 brok	er warra	ants exe	ercisable	e at \$0.75	per share	until	
			February 26,							
Other compensation <sup>5</sup>		Describe								
Total compensation paid										
Check box if the perso	on will or may rece	ive any deferred co	mpensation (des	cribe the	terms be	elow)				
<sup>4</sup> Provide the aggregate value of a additional securities of the issuer rights exercisable to acquire addi <sup>5</sup> Do not include deferred compention <sup>5</sup> Do not include deferred compention	. Indicate the secu itional securities of	rity codes for all sec								

a) Name of person com	pensated and regis	stration status						
Indicate whether the person co	mpensated is a regist	rant.	✓ No	Yes				
If the person compensated is a	n individual, provide	the name of the individ	dual.					
Full legal name of indi	vidual							
		Family name	First	t given name	Secondary given names			
If the person compensated is n	ot an individual, prov	ide the following infor	mation.					
Full legal name	e of non-individual	3063625 Nova Sc	otia Ltd.					
Firm NRD number (if applicable)								
Indicate whether the person co	ompensated facilitated	I the distribution throu	gh a funding port	al or an internet-base	d portal. 🗸 No 🗌 Yes			
b) Business contact info	rmation							
If a firm NRD number is not pr	ovided in Item 8 (a), p	provide the business co	ontact information	of the person being c	ompensated.			
Street address	111 Ahmadi Cres							
Municipality	Bedford			Province/State	e Nova Scotia			
Country	Canada		Р	ostal code/Zip code	e B4A 4E5			
Email address				Telephone numbe	r			
c) Relationship to issuer	or investment fun	d manager						
Indicate the person's relationsh the Instructions and the mean					neaning of "connected" in Part B(2) of			
Connect with the iss	-		· · ·		other than an investment fund)			
		-						
	the investment fund (	or investment fund ma	inager	Employee of the issue	er or investment fund manager			
✓ None of the above								
d) Compensation details	3							
Canadian dollars. Include cash	commissions, securiti Ich as clerical, printin	es-based compensatio g, legal or accounting	n, gifts, discounts services. An issuer	or other compensatior is not required to ask	distribution. Provide all amounts in n. Do not report payments for services for details about, or report on, internal			
Cash commissions p	aid 134,4	06.50		Security code 1	Security code 2 Security code 3			
Value of all securiti distributed as compensation		06.41	Security codes	C M S				
	terms of warrants, or	 otions or other rights		r shares issued at	a deemed price of \$0.265 per			
Other compensation	on <sup>5</sup>	Describe	share.					
Total compensation p								
Check box if the p	erson will or may rec	eive any deferred com	pensation (descr	ibe the terms below)				
<sup>4</sup> Provide the aggregate value additional securities of the iss					rights exercisable to acquire			
rights exercisable to acquire a <sup>5</sup> Do not include deferred com	additional securities c							

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>	diction of Canada							
Foreign public issuer								
Wholly owned subsidiary of	a reporting issuer i	n any jurisdiction of	Canada <sup>6</sup>					
Provide nar	ne of reporting issue	ər						]
Wholly owned subsidiary of	a foreign public iss	suer <sup>6</sup>						
Provide name of	foreign public issue	er						
Issuer distributing only eligi	ble foreign securitie	s and the distributio	n is to permitted clie	ents only <sup>7</sup>				
If the issuer is at least one of the	above, do not com	plete Item 9(a) – (	c). Proceed to Item	10.				
<sup>6</sup> An issuer is a wholly owned subsid securities that are required by law to respectively. <sup>7</sup> Check this box if it applies to the cu clients. Refer to the definitions of "e	o be owned by its di urrent distribution ev ligible foreign secur	irectors, are benefic ven if the issuer mac rity" and "permitted o	ially owned by the re de previous distribut client" in Part B(1) or	eporting issuer or t ions of other types	he foreign	public is	suer,	
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		onship to ct all that	
				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					ationship to promoter one or both if applicable		
				Province or	Province or country D		D	
				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	Cover Technologies Inc.							
Full legal name	.ouie Tony							
	Family name	First given name		Seconda	iry given n	ames		
Title	CEO & Director							
Telephone number	6046872038	Email address	tlouieinva	an@gmai	l.com			
Signature	Tony Louie" Date		2021	03	08			
			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	Alvarez	Diana			Title	Corporate Advisor
	Family name	First given name	Secondary	given names		
Name of company	Partum Advisory Service	es Corp.				
Telephone number	6046872038	E	mail address	dalvarez@p	artumad	visory.com

#### 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.