Form 45-106F1 Report of Exempt Distribution (Non-investment fund issuer)

ITEM 1 – REPORT TYPE						
✓ New report						
Amended report If amended, provide	Submission ID of report that is	s being amended:	(Example: EDR1234567890-123)			
1.	·		, , , , , , , , , , , , , , , , , , , ,			
ITEM 2 – PARTY CERTIFYING TI	HE REPORT					
Indicate the party certifying the report (sele National Instrument 81-106 Investment Fu						
✓ Issuer (Other than an investment fund)						
Underwriter						
ITEM 3 – ISSUER NAME AND OT	THER IDENTIFIERS					
Provide the following information about the Full legal name	e issuer, or if the issuer is an ii	nvestment fund, about the fund.				
Aura Health Inc.						
Previous full legal name <i>If the issuer's nar</i> Lamêlée Iron Ore Ltd.	ne changed in the last 12 mon	ths, provide most recent previous l	egal name.			
Website (if applicable)						
www.aurahealthinc.com						
If the issuer has a legal entity identifier, pr	ovide below. Refer to Part B or	f the Instructions for the definition o	of "legal entity identifier".			
Legal entity identifier						
Did two or more co-issuers distribute a sin	gle security? Vo Yes					
If two or more issuers distributed a single s	ecurity, provide the full legal n	ame(s) of the co-issuer(s) other the	an the issuer named above.			
Full legal name(s) of co-issuer(s)						
ITEM 4 – UNDERWRITER INFOR	MATION					
If an underwriter is completing the report, provide the underwriter's full legal name and firm NRD number. Full legal name						
Does the Underwriter's Firm have an NRD Number? Firm NRD number No Yes						
If the underwriter does not have a firm NRD number, provide the head office contact information of the underwriter.						
Street address	Municipality	Province/State	Postal/ZIP code			
Country	Telephone number	Website (if applicable)				

ITEM 5 – ISSUER INFORMATION		
a) Primary industry		
Provide the issuer's North American Industry corresponds to the issuer's primary busine		igits only) that in your reasonable judgment most closely
NAICS industry code		
413410		
	at best describes the issuer's stage of operati	pply to issuers that provide services to issuers operating in ions.
	all or substantially all of its assets in any of the cial/business debtConsumer debtPriv	- · · · · · · · · · · · · · · · · · · ·
b) Number of employees		
√0 - 49	or more	
c) SEDAR profile number		
Does the issuer have a <u>SEDAR</u> profile? ☐ No ☑ Yes	il yes, provide SEDAR profile flumber.	f the issuer's SEDAR profile is a "private" profile, please provide a screenshot of the issuer's profile by e-mail to exemptmarketfilings@osc.gov.on.ca
d) Head office address	If the iss	suer does not have a SEDAR profile, complete Item 5(d) – (h).
Street address	Municipality Province/State	Postal/ZIP code
Country	Telephone number	
e) Date of formation and financial year	r-end	
Date of formation	Financial year-end	
f) Reporting issuer status		
Is the issuer a reporting issuer in any juriso ☐ No ☐ Yes	liction of Canada?	
If yes, select the jurisdictions of Canada in		
AII AB BC MB	NB NL NT	
NS NU ON PE	UQC USK UYT	
g) Public listing status		
Does the issuer have a CUSIP number? ☐ No ☐ Yes	CUSIP number (provide first 6 digits only)	
	ame of the exchange on which the issuer's eq s, for example, an automated trading system.	uity securities primarily trade. Provide only the name of an
Exchange name: Not Applicable Toro	onto Stock Exchange TSX Venture E	Exchange Canadian Securities Exchange
☐ Aequitas Neo Exchange ☐ Aust	tralian Securities Exchange 🗌 Deutsche Boel	rse Euronext
London Stock Exchange	daq New York Stoo	ck Exchange Shanghai Stock Exchange
Shenzhen Stock Exchange Stoc	ck Exchange Of Hong Kong 🗌 Tokyo Stock E	xchange OTHER
If other, describe:		
h) Size of issuer's assets		
Select the size of the issuer's assets based	d on its most recently available annual financi	ial statements (Canadian \$). If the issuer has not prepared annual
financial statements for its first financial ye	ear, provide the size of the issuer's assets at the tounder \$25M	he distribution end date.
\$100M to under \$500M\$500	OM to under \$1B \$1B or over	

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 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 **End Date** 2019-02-27 2019-02-27 c) Detailed purchaser information Complete Schedule 1 of this form for each purchaser and attach the schedule to the completed report. AURA_-_Schedule_1_-_Form_45-106F1_Report_of_Exempt_Distribution_-_Feb__27__2019.XLSX - 89 KB

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	Number of securities	Single or lowest price	Highest price	Total amount	
SUB		8,726,954.0000	0.2200		1,919,929.8800	
Description of security: Each subscription receipt is comprised of 1 common share and half warrant with whole warrant exercisable at \$0.28 for 2 year						

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.

Not Applicable

Convertible / exchangeable	Underlying security		e price dian \$)	Expiry date (YYYY-MM-DD)	Conversion ratio
security code	code	Lowest	Highest	(1111-141141-00)	
WNT	CMS	0.2800		2021-02-27	
Describe other terms: Each whole warrant is exercisable at a price of \$0.28 for 24 months from date of closing.					

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 of Canada, state the province or territory, otherwise state country.

Province or country	Exemption relied on	No. of unique purchasers ^{2a}	Total amount (Canadian \$)
Ontario	NI 45-106 2.3 [Accredited investor]	21	1,392,430.1600
Alberta	NI 45-106 2.3 [Accredited investor]	4	264,000.0000
Quebec	NI 45-106 2.3 [Accredited investor]	3	115,500.0000
United Kingdom	NI 45-106 2.3 [Accredited investor]	2	27,500.0000
Belgium	NI 45-106 2.3 [Accredited investor]	1	29,999.8600
Netherlands	NI 45-106 2.3 [Accredited investor]	1	29,999.8600
British Columbia	NI 45-106 2.3 [Accredited investor]	4	60,500.0000
	1,919,929.8800		

Total dollar amount or securities distributed	1,919,929.8800
Total number of unique purchasers ^{2b} 36	

^{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.

ITEM 7 - INFORMATION ABOUT THE DISTRIBUTION

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.

√ Not Applicable

	Description	Date of document or other material	Previously filed with or delivered to regulator?	Previously filed Submission ID	Filename
1.			\square Y \square N		

ITEM 8 – COMPENSATION INFORMATION							
Provide information for each pers connection with the distribution.	•	•			• •		
Indicate whether any compensation No ✓ Yes	ion was paid, or will	be paid, in connection	n with the dis	tribution.			
PERSON 1							
a) Name of person compensa	ted and registratio	n status					
Indicate whether the person com ☐ No ☑ Yes	pensated is a regist	rant.					
If the person compensated is an Family name	•	he full legal name of t en name		dary given names			
If the person compensated is not Full legal name of non-individual	an individual, provi	de the following inforn	nation.	Firm NRD number (if	annlicable)		
Mackie Research Capital Corpora	ation			3070			
Indicate whether the person com	pensated facilitated	the distribution through	gh a funding	∟ portal or an internet-bε	ased portal.		
✓ No ☐ Yes	'				,		
b) Business contact information	on						
If a firm NRD number is not prov	ided in Item 8(a), pr	ovide the business co	ontact inform	ation of the person bei	ing compensated.		
Street address	Municipa		Province/Sta	•	Postal/ZIP code		
Country	Telephor	ne number	Email addre	ss		1	
						I	
c) Relationship to issuer or in	vestment fund ma	nager					
Indicate the person's relationship Part B(2) of the Instructions and Connected with the issuer or in	the meaning of "cor	ntrol" in section 1.4 of	NI 45-106 fc		pleting this section	n.	
Insider of the issuer (other tha	n an investment fun	d)	✓ None	e of the above			
Director or officer of the invest	ment fund or investr	ment fund manager					
d) Compensation details							
Provide details of all compensati in Canadian dollars. Include cash for services incidental to the dist about, or report on, internal alloc	h commissions, sec ribution, such as cle	urities-based compen erical, printing, legal c	nsation, gifts, or accounting	discounts or other con services. An issuer is	mpensation. Do no not required to as	ot report payments sk for details	
Cash commissions paid	94,076.5600						
Value of all securities	0.0000	Security code1 WN	T Se	curity code2 UNT	Security code	e3	
 ✓ distributed as compensation⁴ 		Describe terms of wa					
		427,621 Broker Warrants exercisable to acquire 1 unit at \$0.22 for a period of 2 years from the closing date. Each Unit is comprised of 1 common share and one-half warrant. Each whole warrant is exercisable at a price of \$0.28 to purchase 1 common share for a period of 2 years from the closing date.					
Other compensation ⁵		Describe					
Total compensation Paid	94,076.5600						
Check box if the person will o	or may receive any o	deferred compensation	n (describe th	ne terms below)			

to acquire additional securities of ⁵ Do not include deferred compensations.	the issuer.	e. a eeeamaoo aloum	20.00	portional morading	spaces, narrante e	. care ngine oxorologasie
PERSON 2						
a) Name of person compensate	ed and registration	on status				
Indicate whether the person comp ☐ No ☑ Yes	pensated is a regis	trant.				
<i>If the person compensated is an in</i> Family name	•	the full legal name of en name		dary given names		
If the person compensated is not a Full legal name of non-individual	an individual, provi	de the following infori	mation.	Firm NRD number ((if applicable)	
Haywood Securities Inc.				1630		
Indicate whether the person comp √No Yes	pensated facilitated	I the distribution throu	igh a funding	portal or an internet-l	based portal.	
b) Business contact informatio	n					
If a firm NRD number is not provid Street address	ded in Item 8(a), p. Municip		ontact informa	•	eing compensated. Postal/ZIP code	
Country	Telepho	ne number	Email addre	ss	7	
c) Relationship to issuer or inv	estment fund ma	anager				
Part B(2) of the Instructions and to Connected with the issuer or in Insider of the issuer (other than Director or officer of the investment of the investme	vestment fund man	nager nd)	Emp	r the purposes of cor loyee of the issuer or e of the above	· ·	
d) Compensation details						
Provide details of all compensation Canadian dollars. Include cash for services incidental to the distrabout, or report on, internal allocations.	commissions, sec ibution, such as cl	curities-based comper erical, printing, legal o	nsation, gifts, or accounting	discounts or other co services. An issuer	ompensation. Do no is not required to as	t report payments k for details
Cash commissions paid	13,439.5100					
Value of all securities distributed as compensation 4	0.0000	Security code1 WN Describe terms of w	arrants, optio		Security code	
		closing date. Each l	Jnit is compris le at a price c	ole to acquire 1 unit a sed of 1 common sha of \$0.28 to purchase	are and one-half war	rant. Each whole
Other compensation ⁵		Describe				
Total compensation Paid	13,439.5100					
Check box if the person will or	r may receive any o	deferred compensatio	on (describe th	ne terms below)		
⁴ Provide the aggregate value of a	all securities distrib	uted as compensation	n, excluding o	ptions, warrants or o	ther rights exercisal	ble to acquire additional
securities of the issuer. Indicate to acquire additional securities of	he security codes					

 $^{5}\,\mathrm{Do}$ not include deferred compensation.

⁴ Provide the aggregate value of all securities distributed as compensation, excluding options, warrants or other rights exercisable to acquire additional

⁵ Do not include deferred compen	sation.						
PERSON 3							
a) Name of person compensat	ed and registration	on status					
Indicate whether the person comp ☐ No ☑ Yes	pensated is a regis	trant.					
If the person compensated is an in Family name	•	the full legal name of en name		<i>al.</i> ondary given na	ames		
If the person compensated is not	an individual, provi	ide the following info	mation.	=			
Full legal name of non-individual Foundation Markets Inc.				22830	umber <i>(if app</i>	olicable)	
Indicate whether the person comp	nonsated facilitated	the distribution thro	ugh a fundin		ntornot-hasad	d nortal	
✓ No Yes	oensaled lacilitated	The distribution throu	agir a rundin	y portar or arri	memer-basec	т ротат.	
b) Business contact information	on						
If a firm NRD number is not provi	ided in Item 8(a), p	rovide the business o	contact infor	mation of the p	erson being o	compensated.	
Street address	Municip	ality	Province/S	State	Po	stal/ZIP code	
]				
Country	Telepho	ne number	Email add	ress			
c) Relationship to issuer or in	vestment fund ma	anager					
Indicate the person's relationship Part B(2) of the Instructions and	the meaning of "co	ntrol" in section 1.4 o	of NI 45-106	for the purpose	es of complet		
Insider of the issuer (other that	n an investment fur	nd)	✓ No	ne of the above	9		
Director or officer of the investi							
d) Compensation details							
Provide details of all compensation Canadian dollars. Include cash for services incidental to the distrabout, or report on, internal alloca	n commissions, sec ribution, such as cl	curities-based compe erical, printing, legal	nsation, gift or accounti	s, discounts or ng services. An	other compe issuer is not	nsation. Do not repor t required to ask for d	rt payments etails
Cash commissions paid	13,439.5100						
Value of all securities ✓ distributed as	0.0000	Security code1 WN	NT S	Security code2	UNT	Security code3	
distributed as compensation 4		Describe terms of w					
		closing date. Each	Unit is compole at a price	rised of 1 com	mon share ar	22 for a period of 2 yend one-half warrant. En mon share for a perion	ach whole
Other compensation ⁵		Describe					
Total compensation Paid	13,439.5100]					
Check box if the person will o	r may receive any	deferred compensation	on (describe	the terms belo	ow)		
⁴ Provide the aggregate value of a	all securities distrib	uited as compensatio	n eycluding	ontions warr	ants or other	rights evercisable to a	ncauire additional
securities of the issuer. Indicate to acquire additional securities of	the security codes f the issuer.						
⁵ Do not include deferred compen	sation.						

PERSON 4

Indicate whether the person comp ☐ No ☑ Yes	pensated is a regist	trant.					
If the person compensated is an i	individual, provide t	he full legal name of	the individual				
Family name	First giv	en name	Secon	dary given names			
If the person compensated is not	an individual, provi	de the following infori	nation.				
Full legal name of non-individual				Firm NRD number (ii	applicable)		
PI Financial Corp.				5290			
Indicate whether the person comp No Yes	oensated facilitated	the distribution throu	gh a funding	portal or an internet-ba	ased portal.		
b) Business contact information	on						
If a firm NRD number is not provi	ded in Item 8(a), pr	rovide the business c	ontact inform	ation of the person be	ing compensated.		
Street address	Municip	ality	Province/Sta	ite	Postal/ZIP code		
Country	Telepho	ne number	Email addre	SS			
c) Relationship to issuer or in	vestment fund ma	nager					
Part B(2) of the Instructions and a Connected with the issuer or in Insider of the issuer (other than	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. Connected with the issuer or investment fund manager Employee of the issuer or investment fund manager Insider of the issuer (other than an investment fund) Very None of the above						
d) Compensation details							
Provide details of all compensation in Canadian dollars. Include cash for services incidental to the distrabout, or report on, internal allocations.	n commissions, sec ribution, such as cle	urities-based comper erical, printing, legal o	nsation, gifts, or accounting	discounts or other conservices. An issuer is	mpensation. Do no not required to as	et report payments sk for details	
✓ Cash commissions paid	13,439.5100						
Value of all securities	0.0000	Security code1 WN	T Se	curity code2 UNT	Security code	e3	
distributed as		Describe terms of wa	arrants, optio	ns or other rights			
compensation ⁴		61,089 Broker Warrants exercisable to acquire 1 unit at \$0.22 for a period of 2 years from closing date. Each Unit is comprised of 1 common share and one-half warrant. Each whole warrant is exercisable at a price of \$0.28 to purchase 1 common share for a period of 2 years from the closing date.				rrant. Each whole	
Other compensation ⁵		Describe					
ı							
Total compensation Paid	13,439.5100						
Check box if the person will o	r may receive any o	deferred compensatio	n (describe tl	ne terms below)			
⁴ Provide the aggregate value of a securities of the issuer. Indicate to acquire additional securities of ⁵ Do not include deferred compen	the security codes to the issuer.						

ITEM 9 – D	IRECTORS, EXECUTIVE OFFICERS	S AND PROMOTERS OF 1	THE ISSUER							
Indicate whet	her the issuer is any of the following (select the	one that applies - if more than on	e applies, select only one).							
Reporting	issuer in any jurisdiction of Canada									
Foreign p	ublic issuer									
•	ned subsidiary of a reporting issuer in any juris	diction of Canada ⁶								
Wholly ow	Wholly owned subsidiary of a foreign public issuer ⁶									
	ame of foreign public issuer									
	tributing only eligible foreign securities and the	•	•							
⁶ An issue securities ⁷ Check th	uer is at least one of the above, do not com r is a wholly owned subsidiary of a reporting is that are required by law to be owned by its dire his box if it applies to the current distribution eve efer to the definitions of "eligible foreign securit	suer or a foreign public issuer if all ectors, are beneficially owned by t ren if the issuer made previous dis	Il of the issuer's outstanding voting se the reporting issuer or the foreign pub stributions of other types of securities	olic issuer, respectively.						
☐ If the issu	uer is none of the above, check this box an	d complete Item 9(a) – (c).								
a) Directors	executive officers and promoters of the iss	suer								
	llowing information for each director, executive wise state the country. For "Relationship to iss			he province or						
Individual?	Organization or company name	Family name First given name Secondary given name	Business location of non-individual or residential jurisdiction of individual	Relationship to issuer (select all that apply)						
YN				□D □O □P						
b) Promoter	information									
	r listed above is not an individual, provide the f a, state the province or territory, otherwise state									
	Organization or company name	Family name First given name Secondary given name	Residential jurisdiction of individual	Relationship to promoter (select one or both if applicable)						
				□ D □ O						
c) Residenti	al address of each individual									
	hedule 2 of this form providing the full resid completed report. Schedule 2 also requires									

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 exempt distribution.

By completing the information below, I certify, on behalf of the issuer/underwriter, 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/agent [Aura Health Inc.				
Full legal name - Family name	First given na	ame		Secondary given names	
Cohen	Daniel	Daniel			
Title		Telephone number		Email address	
Chief Executive Officer		6472021824		dcohen@aurahealthinc.com	
Signature Daniel Cohen		Date	2019-03-08		

ITEM 11 - CONTACT PERSON

Provide the following business contact information for the individual that the securities regulatory authority or regulator may contact with any questions regarding the contents of this report, if different than the individual certifying the report in Item 10.							
Same as individual certifying the report							
Full legal name - Family name	name First given name Secondary given names			Title			
Katznelson	Alexander			Lawyer			
Name of company		Telephone number Em		address			
Minden Gross LLP		4163694304	akatz	nelson@mindengross.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 Schedule 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.

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Submission ID	Date