Form 45-106F1 Report of Exempt Distribution

IT IS AN OFFENCE TO MAKE A MISREPRESENTATION IN THIS REPORT

ITEM 1 - REPORT TYPE									
✓ New report									
Amended report If amen	ded, provide filing date	of report that is being am	ended (YYYY-MM-DD)						
ITEM 2 - PARTY CERTIFYING THE	REPORT								
	Indicate the party certifying the report (select only one). For guidance regarding whether an issuer is an investment fund, refer to section 1.1 of National Instrument 81-106 Investment Fund Continuous Disclosure and the companion policy to NI 81-106.								
☐ Investment fund issuer									
☑ Issuer (other than an inves	tment fund)								
Underwriter									
ITEM 3 - ISSUER NAME AND OTH	HER IDENTIFIERS								
Provide the following information about the		vestment fund, about the fund.							
Full legal name	Bee Vectoring Technol	logies International Inc.							
Previous full legal name									
If the issuer's name changed in a	the last 12 months, provide mo	ost recent previous legal name.							
Website	www.beevt.com		(if applicable)						
If the issuer has a legal entity identifier. pro	vide below. Refer to Part B of t	he Instructions for the definition	of "legal entity identifier".						
Legal entity identifier									
ITEM 4 - UNDERWRITER INFORM	ATION								
		and firm National Poo	intention Database (NRD) number						
If an underwriter is completing the report, p	Tovide the underwhiler's fall teg	gat name and jum rvational neg	istration Database (ואגט) חמוזוטפו.						
Full legal name									
Firm NRD number		(if applicable)							
If the underwriter does not have a firm NRD) number, provide the head off	ice contact information of the ur	nderwriter.						
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 corresponds to the issuer's primary business activity. For more information on finding the NAICS industry code go to Statistics Canada 's NAICS industry search tool . NAICS industry code 3 2 5 3 2 0						
If the issuer is in the mining industry , indicate the stage of operations. This does not apply to issuers that provide services to issuers operating in the						
mining industry. Select the category that best describes the issuer's stage of operations. Exploration Development Production						
Is the issuer's primary business is 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						
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 ☑ Yes If yes, provide SEDAR profile number 0 0 0 3 2 6 4 6 If the issuer does not have SEDAR profile complete item 5(d) - (h).						
d) Head office address						
Street address Province/State						
Municipality Postal code/Zip code						
Country Telephone number						
e) Date of formation and financial year-end						
Date of formation Financial year-end MM DD MM DD						
f) Reporting issuer status						
Is the issuer a reporting issuer in any jurisdication of Canada? No Yes						
If yes, select the jurisdictions of Canada in which the issuer is a reporting issuer.						
L AII L AB L BC L MB L NB L NL L 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 names of all exchanges on which its securities are listed. Include only the names of exchanges for which the issuer has applied for and received a listing, which excludes, for example, automated trading systems.						
Exchange name(s):						
h) Size of issuer's assets						
Select the size of the issuer's assets for its most recent financial year-end (Canadian \$). If the issuer has not existed for a full 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 - INVESTMEN	T FUND ISSUER INFORMATION							
If the issuer is an invest	If the issuer is an investment fund, provide the following information.							
a) Investment fund m	anager information							
Full legal name								
Firm NRD number	(if applicable)							
If the investment fund ma	nager does not have a firm NRD number, provide the head office contact information of the investment fund manager.							
Street address								
Municipality	Province/State Province/State							
Country	Postal code/Zip code							
Telephone number	Website (if applicable)							
b) Type of investment	t fund							
Type of investment fund tha	t most accurately identifies the issuer (select only one) .							
☐ Money market	☐ Equity ☐ Fixed income							
☐ Balanced	Alternative strategies Other (describe)							
Indicate whether one or bot	h of the following apply to the investment fund .							
☐ Invests primarily ir	other investment fund issuers							
☐ Is a UCITs Fund¹								
	ive Investment of Transferable Securities funds (UCITs Funds) are investment funds regulated by the European Union (EU) we investment schemes to operate throughout the EU on a passport basis on authorization from one member state.							
c) Date of formation a	and financial year-end of the investment fund							
Date of format	tion Financial year-end MM DD MM DD							
d) Reporting issuer st	atus of the investment fund							
Is the investment fund a rep	orting issuer in any jurisdication of Canada? No Yes							
If yes, select the jurisdictions	of Canada in which the investment fund is a reporting issuer.							
All 🗆	AB BC MB NB NL NT							
□ NS □	NU ON PE QC SK YT							
e) Public listing status	s of the investment fund							
If the investment fund has a	CUSIP number, provide below (first 6 digits only)							
	CUSIP number							
1	blicly listed, provide the names of all exchanges on which its securities are listed. Include only the names of exchanges for I for and received a listing, which excludes, for example, automated trading systems.							
Exchange nam	es							
f) Net asset value (NA	AV) of the investment fund							
Select the NAV range of the	Select the NAV range of the investment fund as of the date of the most recent NAV calculation (Canadian \$). \$\Boxed{\Pi}\$0 to under \$5M \Boxed{\Pi}\$5M to under \$25M \Boxed{\Pi}\$25M to under \$100M							
\$100M to under \$500	DM \$500M to under \$1B \$1B or over Date of NAV calculation: YYYY MM DD							

Iтем 7 - I	NFORMATION	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, which should be disclosed in Item 8. The information provided in Item 7 must reconcile with the information provided in Schedule 1 of the report.								
a) Curre	ncy							
Select the cu	rency or currenci	es in which the distribution was made. All d	ollar amounts provided i	n the report mus	st be in Canadiar	n dollars.		
✓ Cana	dian dollar	US dollar Euro	Other (describe)				
b) Distril	oution date(s)							
as both the	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 2017 04 21 YYYY MM DD End date 2017 04 21 YYYY MM DD							
c) Detail	ed purchaser ir	nformation						
Complete S	chedule 1 of th	nis form for each purchaser and atto	ich the schedule to t	he completed	report.			
d) Types	of securities d	istributed						
Provide the following information for all distributions that take place in a jurisdiction of Canada on a per security basis. Refer to Part A 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. The information included in item 7d must reconcile to item 7f. For examples on how to report convertible securities, see our Frequently-Asked Questions . Canadian \$								
Security code	CUSIP number (if applicable)	Description of security	Number of securities	Single or lowest price	Highest price	Total amount		

e) Details of rights and convertible/exchangeable securities

076588

UBS

Unit - one share and one half

warrant at \$0.40 for 2 years

(subject to acceleration).

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.

1,112,000.00

0.2500

278,000.00

Security code		,		,		Underlying security code		Underlying security code					(Conc	se price adian \$)	Expiry date (YYYY- MM-DD)	Conversion ratio	Describe other items (if applicable)
							Lowest	Highest									
V	1 V	N	Т	С	М	S	0.4000		2019-04-21		Each whole warrant exercisable for one common share at \$0.40 subject to acceleration if the company trades at \$0.65 or more for 30 consecutive trading days.						

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 purchasers	Total amount (Canadian \$)
Germany	Other	1	50,000.00
British Columbia	NI 45-106 2.3 [Accredited investor]	6	176,000.00
Ontario	NI 45-106 2.3 [Accredited investor]	3	52,000.00
	278,000.00		
	10		

²In 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. If an issuer located outside of Canada completes a distribution in a jurisdiction of Canada, include net proceeds for that jurisdiction of Canada only. For jurisdictions within Canada, state the province or territory, otherwise state the country.

Province or country	Net proceeds (Canadian \$)
Total net proceeds to the investment fund	

³"Net proceeds" means the gross proceeds realized in the jurisdiction from the distributions for which the report is being filed, less the gross redemptions that occurred during the distribution period covered by the report.

h) Offering materials - This section applies only in Saskatchewan, Ontario, Québec, New Brunswick and Nova Scotia.

If a distribution has occurred in Saskatchewan, Ontario, Québec, New Brunswick or Nova Scotia, complete the table below by listing the offering materials that are required under the prospectus exemption relied on to be filed with or delivered to the securities regulatory authority or regulator in those jurisdictions.

In Ontario, if the offering materials listed in the table are required to be filed with or delivered to the Ontario Securities Commission (OSC), attach an electronic version of the offering materials that have not been previously filed with or delivered to the OSC.

Description	Date of document or other material (YYYY-MM-DD)	Previously filed with or delivered to regulator? (Y/N)	Date previously filed or delivered (YYYY-MM-DD)	

ITEM 8 - COMPENSATION INFO	DRMATION							
Provide information for each person (as with the distribution. Complete addition		* *	•	*				
Indicate whether any compensation was	Indicate whether any compensation was paid, or will be paid, in connection with the distribution.							
☐ No ☑ Yes If	yes, indicate number of perso	ons compensated.	2					
a) Name of person compensated	d and registration status							
Indicate whether the person comper	nsated is a registrant.	✓ No □ Y	⁄es					
If the person compensated is an individ	dual, provide the name of the indi	vidual.						
Full legal name of individual								
	Family name	First given name	Secon	ndary given names				
If the person compensated is not an i	•							
Full legal name of non-i	individual Chelmer Investme	ents Corp.						
Firm NRD) number		(if appli	icable)				
Indicate whether the person compens	sated facilitated the distribution th	rough a funding portal or a	ın internet-base	ed portal. Ves				
b) Business contact information								
If a firm NRD number is not provided t	in Item 8 (a), provide the business	contact information of the	person being co	empensated.				
Street address 2717 29	th Ave W							
Municipality Vancou	ver	Pro	ovince/State	British Columbia				
Country Canada	<u> </u>	Postal co	de/Zip code	V6L 1X8				
Email address		Telepho	one number					
c) Relationship to issuer or inves	stment fund manager							
	ng of "control" in section 1.4 of NI	45-106 for the purposes of Insider of	completing this the issuer (oth					
None of the above								
d) Compensation details		(C. 1: 1/2 O/):						
Provide details of all compensation pail Canadian dollars. Include cash commis services incidental to the distribution, s on, internal allocation arrangements w	ssions, securities-based compensat uch as clerical, printing, legal or a with the directors, officers or emplo	tion, gifts, discounts or other ccounting services. An issue	r compensation. er is not required	. Do not report payments for d to ask for details about, or report				
Cash commissions paid	1,500.00	Security codes Security codes	ecurity code 1	Security code 2 Security code 3				
Value of all securities distributed as compensation ⁴		W	/ N T					
Describe terms of v	Describe terms of warrants, options or other rights Each warrant is exercisable for one common share at \$0.40 for 2 years subject to the acceleration of the expiry date if the common shares of the company trade over \$0.65 for 30 consecutive trading days.							
Other compensation ⁵	Describe							
Total compensation paid	1,500.00							
Check box if the person will	or may receive any deferred com	npensation (describe the te	erms below)					
⁴ Provide the aggregate value of all se	ecurities distributed as componen	tion excluding entions wa	arrante or other	rights evercisable to acquire				
additional securities of the issuer. Ind rights exercisable to acquire additional Do not include deferred compensation	licate the security codes for all se al securities of the issuer.							

a) Name of person compens	sated and registration status								
Indicate whether the person cor	npensated is a registrant.	☐ No	✓ Yes						
If the person compensated is an ir	If the person compensated is an individual, provide the name of the individual.								
Full legal name of individua	Full legal name of individual								
	Family name	First given n	name Sec	condary given names					
If the person compensated is not	an individual, provide the following	information.							
Full legal name of n	non-individual Canaccord Genu	ity Corp.							
Firm I	NRD number 9 0 0		(if ap	plicable)					
Indicate whether the person com	pensated facilitated the distribution	through a funding po	rtal or an internet-ba	sed portal. ✓ No ☐ Yes					
b) Business contact informat	tion								
If a firm NRD number is not provi	ded in Item 8 (a), provide the busines	s contact information	n of the person being	compensated.					
Street address									
Municipality		7	Province/State						
Country		_ 7 ₽0	stal code/Zip code						
Email address		_	Telephone number						
		'							
c) Relationship to issuer or in									
	with the issuer or investment fund m eaning of "control" in section 1.4 of N								
	r investment fund manager			ther than an investment fund)					
Director or officer of the in	nvestment fund or investment fund n	nanager	mployee of the issue	r or investment fund manager					
✓ None of the above		_							
d) Compensation details									
Provide details of all compensation Canadian dollars. Include cash con	n paid, or to be paid, to the person id mmissions, securities-based compens on, such as clerical, printing, legal or	ation, gifts, discounts	or other compensation	n. Do not report payments for					
	nts with the directors, officers or emp	-	•						
Cash commissions paid	13,680.00	Security codes	Security code 1	Security code 2 Security code 3					
Value of all securities distributed as compensation ⁴		,	W N T						
Describe terms of warrants, options or other rights Each warrant is exercisable for one common share at \$0.40 for 2 years subject to the acceleration of the expiry date if the common shares of the company trade over \$0.65 for 30 consecutive trading days.									
Other compensation ⁵	Describe								
Total compensation paid									
Check box if the person	will or may receive any deferred co	mpensation (describ	e the terms below)						

ГЕМ	9 - DIRECTORS, EXECUTI	VE OFFICERS A	AND PROMO	TERS OF THE IS	SSUER					
If t	he issuer is an investment fund, o	do not complete I	tem 9. Procced to	o Item 10.						
Ind	Indicate whether the issuer is any of the following (select all that apply).									
Reporting issuer in any jurisdiction 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 f	oreign public issu	er ⁶							
	Provide name of for	eign public issuer								
	Issuer distributing eligible forei	gn securities only	to permitted clien	ts ⁷						
⁶ An secu ⁷ Che	If the issuer is at least one of the above, do not complete Item 9(a) – (c). Proceed to Item 10. ⁶ An issuer is a wholly owned subsidiary of a reporting issuer or a foreign public issuer if all of the issuer's outstanding voting securities, other than securities that are required by law to be owned by its directors, are beneficially owned by the reporting issuer or the foreign public issuer, respectively. ⁷ Check this box if it applies to the current distribution even if the issuer made previous distributions of other types of securities to non-permitted clients. Refer to the definitions of "eligible foreign security" and "permitted client" in Part B(1) of the Instructions. If the issuer is none of the above, check this box and complete Item 9(a) - (c).									
a)	Directors, executive officers a		-							
	ovide the following information for rritory; otherwise state the country.	each director, exec	cutive officer and p				da, sta	te the p	province (or
Business non-indi resid purisdi purisd			non-individ resider jurisdicti	Business location of non-individual or residentail jurisdiction of individual			ip to that			
					Province o	r country	D	0	Р	
b)	Promoter information									
	the promoter listed above is not an ithin Canada, state the province or t									
	Organization or company name	Family name	First given		Residential jurisdiction of individual	Relationship to promoter (select one or both if applicable				
					Province or country	D		C)	
]
c)	Residential address of each in	ndividual								

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 or director 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 not be delegated to an agent or other individual preparing the report on behalf of the issuer or underwriter. If the individual completing and filing the report is different from the individual certifying the report, provide their name and contact details 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.

IT IS AN OFFENCE TO MAKE A MISREPRESENTATION IN THIS REPORT

By completing the information below, I certify to the securities regulatory authority or regulator that:

- I have read and understand this report; and
- all of the information provided in this report is true.

Full legal name	Full legal name Malik		Ashish					
	Family name	First given name		Secondary given names				
Title	Fitle President, CEO							
Name of issuer/underwriter/ investment fund manager	Bee Vectoring Technologies Ir	Bee Vectoring Technologies International Inc.						
Telephone number		Email address amalik@bvt.com						
Signature	"Ashish Malik"	Date 2017		04	25			
		-	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	Topolewski	Danica		Title Assistant Corporate
	Family name	First given name	Secondary given	Secretary

Name of company | Bee Vectoring Technologies International

Telephone number 6046388063

names

Email address | dtopolewski@cdmcp.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:

- 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
- has authorized the indirect collection of the information by the securities regulatory authority or regulator.