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

ITEM 1 – REPORT TYPE							
TIEM I - KEI OKI TITE							
✓ New report							
Amended report If amended, pr	ded report If amended, provide Submission ID of report that is being amended: (Example: EDR1234567890-123)						
ITEM 2 - PARTY CERTIFYIN	G 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. Issuer (Other than an investment fund)							
ITEM 2 ICCUED NAME AND	OTHER IDENTIFIEDS						
ITEM 3 – ISSUER NAME ANI	OTHER IDENTIFIERS						
Provide the following information about	out the issuer, or if the issuer is ar	n investment fund, about the fund					
Full legal name Biome Grow Inc.							
			us land name				
Previous full legal name If the issuer	's name changed in the last 12 me	ontns, provide most recent previo	us iegai name.				
Website (if applicable)							
www.biomegrow.com							
If the issuer has a legal entity identifi	 ier, provide below. Refer to Part B	of the Instructions for the definiti	on of "legal entity identifier".				
Legal entity identifier	o., provide 2010		or regar entity recuiring				
Did two or more co-issuers distribute	a single security? ✓ No ☐ Ye	25					
	,		then the investment of the con-				
If two or more issuers distributed a sin Full legal name(s) of co-issuer(s)	igie security, provide the full legal	i name(s) of the co-issuer(s) other	than the issuer named above.				
an legal name(e) of se legal(e)							
ITEM 4 LINDEDWRITER IN	FORMATION						
ITEM 4 – UNDERWRITER IN	FORMATION						
If an underwriter is completing the rep	oort, provide the underwriter's full	legal name and firm NRD number					
Full legal name							
Does the Underwriter's Firm have an NRD Number? No Yes Firm NRD number							
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 Indus corresponds to the issuer's primary busine	stry Classification Standard (NAICS) code (6 digits only) that in ess activity.	n your reasonable judgment most closely
NAICS industry code		
312310		
	dicate the stage of operations. This does not apply to issuers and best describes the issuer's stage of operations.	that provide services to issuers operating in
* *	all or substantially all of its assets in any of the following? If y rcial/business debt Consumer debt Private companies	• • •
b) Number of employees		
√ 0 - 49	or more	
c) SEDAR profile number		
Does the issuer have a <u>SEDAR</u> profile? ☐ No ☑ Yes	screenshot of th	EDAR profile is a "private" profile, please provide a le issuer's profile by e-mail to ings@osc.gov.on.ca
d) Head office address	If the issuer 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	diction of Canada?	
If yes, select the jurisdictions of Canada in		
AII AB BC MB	NB NL NT	
NS NU ON PE	∐QC ∐SK ∐YT	
g) Public listing status		
Does the issuer have a CUSIP number?	CUSIP number (provide first 6 digits only)	
· · · · · · · · · · · · · · · · · · ·	name of the exchange on which the issuer's equity securities ps, for example, an automated trading system.	orimarily trade. Provide only the name of an
Exchange name: Not Applicable Torc	onto Stock Exchange TSX Venture Exchange	Canadian Securities Exchange
Aequitas Neo Exchange	stralian Securities Exchange Deutsche Boerse	Euronext
London Stock Exchange	daq New York Stock Exchange	Shanghai Stock Exchange
Shenzhen Stock Exchange Stoc	ck Exchange Of Hong Kong 🗌 Tokyo Stock Exchange	OTHER
If other, describe:		
h) Size of issuer's assets		
financial statements for its first financial ye	ed on its most recently available annual financial statements (the ear, provide the size of the issuer's assets at the distribution of the under \$25M.	
	7 to under \$25M\$25M to under \$100M 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

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
2018-10-19	2018-10-19

c) Detailed purchaser information

Complete Schedule 1 of this form for each purchaser and attach the schedule to the completed report.

Schedule-1.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
CMS		75,625.0000	1.6000		121,000.0000
Description of security:	Description of security:				
WNT 625.000			1.6000		1,000.0000
Description of security: Common Share Purc	hase Warrants				

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	•	Exercis (Canad	•	Expiry date (YYYY-MM-DD)	Conversion ratio
security code	code	Lowest	Highest	(1111-WIW-DD)	
WNT	CMS	1.6000		2021-10-19	
Describe other					

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]	1	2,000.0000
Nova Scotia	NI 45-106 2.3 [Accredited investor]	1	120,000.0000
	122,000.0000		

^{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?	,	Filename
1.			\square Y \square N		

ITEM 8 - COMPENSATIO	N INFORMATI	ON					
Provide information for each pers connection with the distribution.	•				• •		
Indicate whether any compensation of the second of the se	ion was paid, or wi	ll be paid, in connectio	n with the dis	tribution.			
PERSON 1							
a) Name of person compensati	ted and registrati	on status					
Indicate whether the person com	pensated is a regis	strant.					
If the person compensated is an Family name	If the person compensated is an individual, provide the full legal name of the individual. Family name First given name Secondary given names						
If the person compensated is not Full legal name of non-individual	an individual, prov	ide the following inforr	nation.	Firm NRD number (if a	applicable)		
Indicate whether the person com	pensated facilitate	d the distribution throu	gh a funding	portal or an internet-ba	sed portal.		
b) Business contact information	on						
If a firm NRD number is not prov	ided in Item 8(a), p	provide the business c	ontact informa	ation of the person beir	ng compensated.		
Street address	Munici		Province/Sta	•	Postal/ZIP code		
Country	Telepho	one number	Email addres	SS			
			<u></u>				
c) Relationship to issuer or in	vestment fund m	anager					
Indicate the person's relationship Part B(2) of the Instructions and Connected with the issuer or in	the meaning of "co	ontrol" in section 1.4 of	f NI 45-106 fo		pleting this section).	
Insider of the issuer (other tha	n an investment fu	nd)	None	e of the above			
Director or officer of the invest	ment fund or inves	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, se ribution, such as c	curities-based comper lerical, printing, legal o	nsation, gifts, or accounting	discounts or other com services. An issuer is	npensation. Do not not required to asi	t report payme k for details	
Cash commissions paid							
Value of all securities		Security code1	Sec	curity code2	Security code	3	
distributed as compensation ⁴		Describe terms of wa	arrants, optior	ns or other rights			
Other compensation ⁵		Describe					
Total compensation Paid	0.0000]					
Check box if the person will o	or may receive any	deferred compensatio	n (describe th	e terms below)			

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

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

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	Foreign public issuer						
•	Wholly owned subsidiary of a reporting issuer in any jurisdiction of Canada ⁶ Provide name of reporting issuer						
Wholly ow	ned 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	Blome Grow Inc.				
Full legal name - Family name	Fir	st given name		Secondary given names	
Malik	Kh	nurram			
Title		Telepho	one number	Email address	
President		416875	58395	kmalik@biomegrow.com	
Signature "Khurram Malik"		Date	2018-10-29		
ITEM 11 – CONTACT PERS	SON				
Provide the following business con	stact information for the in	dividual that the se	ocurities regulator	y authority or regulator may contact with any	

· ·	ntact information for the individual th of this report, if different than the inc	9 ,	nority or regulator may contact with any em 10.
Same as individual certifying the	e report		
Full legal name - Family name	Title		
Monteiro Carla			Securities Law Clerk
Name of company		Telephone number	Email address
Norton Rose Fulbright Canada LLF)	4162164040	carla.monteiro@nortonrosefulbright.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.

EDR1540324818-544	2018-10-29 16:10:16.844
Submission ID	Date