Form 45-106F1 Report of Exempt Distribution

Item 1 – Report Type												
✓ New report												
Amended report	If amended, provide fili	ng date of report that is beir	ng amended.	(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												
\checkmark Issuer (other than an investment of the second	nent fund)											
Underwriter												
Item 3 – Issuer Name an	ND OTHER IDEN'	TIFIERS										
Provide the following information about the	issuer, or if the issuer is an	investment fund, about the fund	<i>d.</i>									
Full legal name	PlantFuel Life Inc.											
Previous full legal name												
If the issuer's name changed in th	-											
Website	www.plantfuellife.c	om (if a	applicable)									
If the issuer has a legal entity identifier, prov	vide below. Refer to Part B	of the Instructions for the defin	ition of "legal entity identifier".									
Legal entity identifier	529900HHNO3Q7S6	V1E90										
If two or more issuers distributed a single se	curity, provide the full lega	l name(s) of the co-issuer(s) oth	her than the issuer named above.									
Full legal name(s) of co-issuer(s)	N/A	(if a	applicable)									
Item 4 – Underwriter I												
		ll loo al a ano and fam NBD an	where									
If an underwriter is completing the report, p Full legal name N/A	roviae ine unaerwriier s jui	i legal name ana jirm NKD nur	nder.]								
Firm NRD number		(if applicable)										
If the underwriter does not have a firm NRD	number, provide the head of	office contact information of the	e underwriter.	1								
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 4 4 6 1 9 1
If the issuer is in the mining industry , indicate the stage of operations. This does not apply to issuers that provide services to issuers operating in the mining industry. Select the category that best describes the issuer's stage of operations.
Exploration Development Production
Is the issuer's primary business to invest all or substantially all of its assets in any of the following? If yes, select all that apply.
Mortgages Real estate Commercial/business debt Consumer debt Private companies
Cryptoassets
b) Number of employees
Number of employees: \checkmark $0-49$ $50-99$ $100-499$ 500 or more
c) SEDAR profile number
Does the issuer have a <u>SEDAR</u> profile?
No \checkmark YesIf yes, provide SEDAR profile number00035920
If the issuer does not have a 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 jurisdiction of Canada? No Yes
If yes, select the jurisdictions of Canada in which the issuer is a reporting issuer.
All AB BC MB NB NL NT
NS NU ON PE QC SK YT
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
\$100M to under \$500M \$500M to under \$1B \$1B or over

Item 6 – Investment Fund Issuer Information
If the issuer is an investment fund, provide the following information.
a) Investment fund manager information
Full legal name N/A
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
Country Postal code/Zip code
Telephone number Website (if applicable)
b) Type of investment fund
Type of investment fund that most accurately identifies the issuer (select only one). Image: Cryptoasset integration of the issuer (select only one). Money market Equity Image: Fixed income Balanced Alternative strategies Cryptoasset Other (describe) Image: Cryptoasset
Invests primarily in other investment fund issuers Is a UCITs Fund ¹ ¹ Undertaking for the Collective Investment of Transferable Securities funds (UCITs Funds) are investment funds regulated by the European Union (EU) directives that allow collective investment schemes to operate throughout the EU on a passport basis on authorization from one member state. C) Date of formation and financial year-end of the investment fund Financial year-end
YYYY MM DD MM DD
d) Reporting issuer status of the investment fund Is the investment fund a reporting issuer in any jurisdiction of Canada? No
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 of the investment fund If the investment fund has a CUSIP number, provide below (first 6 digits only). CUSIP number
If the investment fund is publicly listed, provide the name of the exchange on which the investment fund's securities primarily trade. Provide only the name of an exchange and not a trading facility such as, for example, an automated trading system. Exchange 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 \$). \$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: YYYY M/M DD

ITEM 7 – INFORMATION ABOUT THE DISTRIBUTION

If an issuer located ou resident in that jurisdid distribution, which mu	ction of Canada o	nly. Do not i	nclude in Item	7 securities issued	as paymer	nt of comm	nissions or fin	ider's fees in	connection with the	2		
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. Image: Canadian dollar US dollar Euro Other (describe)												
b) Distributio	on date(s)											
State the distribution s the start and end dates covered by the report.	. If the report is b	peing filed for	securities dist	ributed on a contin	uous basis	s, include	the start and	end dates for				
Start date 2022 03 01 End date 2022 03 09 YYYY MM DD YYYY MM DD												
c) Detailed p	urchaser inform	nation										
Complete Schedule	1 of this form f	for each pu	rchaser and a	uttach the schedi	ile to the	complet	ted report.					
d) Types of s	ecurities distrib	outed										
Provide the following code. If providing the (curity		
	CUSIP number				Num	nber of	Single or	Highest				
	(if applicable)		Description of	security		urities	lowest price	price	Total amount			
U B S	72748Q108		Units		5,9	980,000	\$0.50	\$0.50	\$2,990,000.00			
U B S	72748Q108		Units		1	771,000	\$0.50	\$0.50	\$385,500.00			
Total:					6,7	751,000			\$3,375,500.00	l		
e) Details of	rights and conv	ertible/excl	nangeable sec	urities								
If any rights (e.g. warr	ants, options) we	re distributea	l, provide the e:	xercise price and e.				onvertible/ex	changeable securit	ies were		
distributed, provide the	e conversion ratio		-	ns for each conver	tible/exche	angeable	security.			1		
Convertible / exchangeable security code	Underlying security code		ise price adian \$) Highest	Expiry date (YYYY-MM- DD)	Convers	ion ratio	atio Describe other terms (if applicable)					
W N T	C M S	\$0.62	\$0.62	2024-03-01	1:	:1	Transferable	e.				
W N T	C M S	\$0.62	\$0.62	2024-03-09	1:	:1	Transferable	e.]		
f) Symmomy	of the distributi	an hu innia	listian and an	anation								
State the total dollar a resides and for each es jurisdiction of Canada This table requires a so resides, if a purchaser	 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		Ex	emption relied	on			r of unique hasers ^{2a}	Total amou	unt (Canadian \$)			
BC		NI 45-106 s	s.2.3 – Accredit	ted Investor			15		\$362,500			
AB	-		s.2.3 – Accredit				3		\$135,000			
MB	MB NI 45-106 s.2.3 – Accredited Investor						1		\$40,000			
ON NI 45-106 s.2.3 – Accredited Investor						43			\$2,166,000			
QC NI 45-106 s.2.3 – Accredited Investor							4		\$210,000			
NS NI 45-106 s.2.3 – Accredited Investor							1		\$25,000	l		
Barbados			s.2.3 - Accredit				1		\$87,000	l		
Bermuda		INI 45-106 s	s.2.3 – Accredit			aux*4*	1		\$350,000			
				Total dollar amo					\$3,375,500			
				er of unique purcl			69	-		ł		
^{2a} In calculating the num	nber of unique pi	urchasers per	row, count eac	ch purchaser only o	once. Join	t purchas	ers may be co	ounted 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.

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.³ 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 \$)
N/A	
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)
1.	N/A			
2.				
3.				

ITEM 8 – COMPENSATION INFORMATION

Provide information for each person (as defined in NI 45-106) to whom the issuer directly provides, or will provide, any compensation in connection with the distribution. Complete additional copies of this page if more than one person was, or will be, compensated.

2

Indicate whether any compensation was paid, or will be paid, in connection with the distribution.

a) Name of person compensated and reg	istration status				
Indicate whether the person compensated is a registre	unt.				
If the person compensated is an individual, provide the	e name of the individu	al.			
Full legal name of individual					
F	amily name	First given na	me	Secondary given names	•
If the person compensated is not an individual, provid	le the following inform	ation.			
Full legal name of non-individual	Echelon Wealth P	artners Inc.			
Firm NRD number	3 2 4 2	2 0	(if applica	ble)	
Indicate whether the person compensated facilitated t	he distribution through	h a funding portal or a	n internet-b	ased portal.	
b) Business contact information					
If a firm NRD number is not provided in Item 8(a), pr	ovide the business con	tact information of the	person bei	<i>1g compensated.</i>	
Street address					
Municipality		Provi	nce/State		
Country	Country				
Email address		Telephon	e number		
c) Relationship to issuer or investment f	und manager				
Indicate the person's relationship with the issuer or in Instructions and the meaning of "control" in section					in Part $B(2)$ of the

Connected with the issu	er or investment f	und manager										
Insider of the issuer (oth	her than an investr	nent fund)										
Director or officer of the	e investment fund	or investment fund	manager									
Employee of the issuer	or investment fund	d manager										
\checkmark None of the above		C										
d) Compensation details												
Provide details of all compensation	paid, or to be paid	d, to the person iden	tified in Item 8	R(a) in c	onnect	tion with	h the di	istribut	ion. Pro	ovide al	l amoun	ts in
Canadian dollars. Include cash com incidental to the distribution, such a	missions, securitie	es-based compensati	ion, gifts, disco	ounts or	• other	comper	isation	. Do ne	ot repor	t payme	ents for s	ervices
allocation arrangements with the dis	rectors, officers of							i jor uc	iuns ub	011, 07 1	cpon o	i, inicinai
Cash commissions paid	\$30,000											
Value of all securities distributed as compensation ⁴	-	Se	curity codes	Seci W	urity cod N	ie 1 T	Sec C	curity co	de 2 S	Sec	urity code	23
as compensation]	01.740					M				
Describe term	ns of warrants, opt	ions or other rights	31,740 tran Mar. 1/24 per share u	and 28	,260 ti	ransfer						
Other compensation ⁵		Describe										
Total compensation paid	\$30,000]										
Check box if the person w	vill or may receive	e any deferred compe	ensation (desci	ibe the	terms l	below)						
⁴ Provide the aggregate value of all s securities of the issuer. Indicate the acquire additional securities of the i	security codes for											
⁵ Do not include deferred compensat												
e) Name of person comp	ensated and regi	istration status										
Indicate whether the person compen	asated is a registra	int.										
If the person compensated is an indi	ividual, provide th	e name of the individ	dual.								٦	
Full legal name of individu								<u> </u>				
If the person compensated is not an		amily name		rst given	name			Seconda	ary given	names		
Full legal name of	-			n								
-					(:6		.1.1.)					
Indicate whether the person compen	n NRD number asated facilitated to		0 Igh a funding p	oortal o		applica ternet-l		oortal.				
f) Business contact infor	mation											
If a firm NRD number is not provide		ovide the business co	ontact informa	tion of t	the per	son bei	ng com	pensat	ed.			
Street address	-											
Municipality]	Pro	ovince	/State						
Country			Po	stal co	de/Zip	o code						
Email address] ,	Feleph	one nu	ımber						
g) Relationship to issuer	or investment fi	und manager	J	1								
Indicate the person's relationship w Instructions and the meaning of "co	ith the issuer or in	vestment fund mana						aning o	of "conn	nected"	in Part I	B(2) of the
Connected with the issu				, compi								
Insider of the issuer (oth												
Director or officer of the		,	manager									
Employee of the issuer			8									
✓ None of the above	s. m. estment full	a munugor										
• None of the above												

h) Compensation details											
Provide details of all compensation pa Canadian dollars. Include cash commi incidental to the distribution, such as c	ssions, securities-based	l compensation	n, gifts, disc	ounts or	other co	ompensa	tion. Do not repo	rt payme	nts for s	ervices	
allocation arrangements with the direc	tors, officers or employ	vees of a non-in	ndividual co	ompensa	ted by th	he issuer.					
Cash commissions paid	\$39,750										
Value of all securities distributed as compensation ⁴	-	Secu	rity codes	Seci W	urity code N		Security code 2 C M S	Sect	urity code	: 3	
Describe terms of	rms of warrants, options or other rights 79,500 transferable warrants exercisable at \$0.50 per share until Mar. 1/24.										
Other compensation ⁵		Describe									
Total compensation paid	\$39,750										
Check box if the person will	or may receive any def	ferred compens	sation (desc	ribe the	terms be	elow)					
⁴ Provide the aggregate value of all sec securities of the issuer. Indicate the sec acquire additional securities of the issu	curity codes for all secu uer.										
⁵ Do not include deferred compensation											
Item 9 – Directors, Ex	ECUTIVE OFFIC	ERS AND H	PROMOT	ERS C	F THE	e Issui	ER				
If the issuer is an investment fund, do	not complete Item 9. I	Proceed to Iten	n 10.								
Indicate whether the issuer is any of th	e following (select the o	one that applie	es – if more	than one	e applies	s, select o	nly one).				
✓ Reporting issuer in any jurisdi	ction of Canada										
Foreign public issuer											
Wholly owned subsidiary of a	reporting issuer in any	jurisdiction of	f Canada ⁶								
Provide na	ume of reporting issuer										
Wholly owned subsidiary of a	foreign public issuer ⁶										
Provide name o	of foreign public issuer										
Issuer distributing only eligibl	e foreign securities and	the distribution	on is to pern	nitted cli	ents onl	y ⁷					
If the issuer is at least one of the abov ⁶ An issuer is a wholly owned subsidiar that are required by law to be owned b	y of a reporting issuer of	or a foreign pu	ublic issuer	if all of i						n securities	
⁷ Check this box if it applies to the current to the definitions of "eligible foreign set	ent distribution even if	the issuer mad	e previous d	listribut	ions of o		-	-		ients. Refer	
If the issuer is none of the ab	ove, check this box and	l complete Iter	m 9(a) – (c)								
a) Directors, executive officient	cers and promoters o	f the issuer									
Provide the following information for e otherwise state the country. For "Relat								ate the p	ovince o	or territory,	
Organization or company name	Family name	First give name	en Sec	ondary ; names	_	non- resider	ess location of individual or itial jurisdiction individual		onship te t all that		
						Provi	nce or country	D	0	Р	
b) Promoter information											
If the promoter listed above is not an in within Canada, state the province or te											
Organization or company name	Family name	First given name	n Secor given i	2	juriso	sidential diction of lividual	Relati (select on	onship to e or both			

			Province or country	D	0	
N/A						
 c) Residential address of eac	h individual					

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 exempt 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	PlantFuel Life Inc.					
Full legal name	Pyatt	Brad				
	Family name	First given nan	ne	Secondary given nam		
Title	CEO					
Telephone number	888.630.6938	Email address	bra	brad@plantfuel.com		
Signature	"Brad Pyatt"	Date	2022 YYYY	03 MM	11 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	Wonnacott	Anthony	John	Title	President
	Family name	First given name	Secondary given n	ames	
Name of company	Wonnacott Consulting Professional Corporation				
Telephone number	416.953.5879		mail address	tony@legalconsulting.ca	

Notice – Collection and use of personal information

The personal information required under this form is collected on behalf of and used by the securities regulatory authority or regulator under the authority granted in securities legislation for the purposes of the administration and enforcement of the securities legislation.

If you have any questions about the collection and use of this information, contact the securities regulatory authority or regulator in the local jurisdiction(s) where the report is filed, at the address(es) listed at the end of this form.

The attached Schedules 1 and 2 may contain personal information of individuals and details of the distribution(s). The information in Schedules 1 and 2 will not be placed on the public file of any securities regulatory authority or regulator. However, freedom of information legislation may require the securities regulatory authority or regulator to make this information available if requested.

By signing this report, the issuer/underwriter confirms that each individual listed in Schedule 1 or 2 of the report who is resident in a jurisdiction of Canada:

- a) has been notified by the issuer/underwriter of the delivery to the securities regulatory authority or regulator of the information pertaining to the individual as set out in 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.