# Form 45-106F1 Report of Exempt Distribution

IT IS AN OFFENCE TO MAKE A MISREPRESENTATION IN THIS REPORT

Item 1 - Report Type			
<ul> <li>New report</li> <li>Amended report</li> <li>If amen</li> </ul>	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 (selec National Instrument 81-106 Investment Fur			
Investment fund issuer			
✓ Issuer (other than an inves	tment fund)		
Underwriter			
ITEM 3 - ISSUER NAME AND OTH Provide the following information about the		vestment fund, about the fund	
Full legal name	Leenlife Pharma Intern		
Previous full legal name			
If the issuer's name changed in a	the last 12 months provide m	ost recent previous legal name	
Website			(if applicable)
If the issuer has a legal entity identifier pro	uida halayu Bafar ta Bart B af t	the Instructions for the definition	
Legal entity identifier			of legal entry dentifier .
ITEM 4 - UNDERWRITER INFORM	ATION		
If an underwriter is completing the report, p	rovide the underwriter's full le	gal name and firm National Reg	istration Database (NRD) number.
Full legal name			
Firm NRD number		(if applicable)	
If the underwriter does not have a firm NRD	) number, provide the head off	fice contact information of the ur	nderwriter.
Street address			
Municipality		Province/State	
Country		Postal code/Zip code	
Telephone number			(C)
		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 <b>Statistics Canada's NAICS industry search tool</b> .
NAICS industry code 4 1 4 5 1 0
If the issuer is in the <b>mining industry</b> , indicate the stage of operations. This does not apply to issuers that provide services to issuers operating in the mining industry. Select the category that best describes the issuer's stage of operations.   Exploration  Development  Production
Is the issuer's primary business is to invest all or substantially all of its assets in any of the following? If yes, select all that apply.           Image:
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       3       6       0       1       8
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
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.
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
S100M to under \$500M S500M to under \$1B \$1B or over

ITEM 6 - INVESTMENT	Fund Issuer Information				
If the issuer is an investr	nent fund, provide the following information.				
a) Investment fund ma	nager informaiton				
Full legal name					
Firm NRD number	(if applicable)				
If the investment fund man	ager 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) .				
Money market	Equity Fixed income				
Balanced	Alternative strategies Other (describe)				
Indicate whether one or both	of the following apply to the investment fund .				
Invests primarily in	other investment fund issuers				
Is a UCITs Fund <sup>1</sup>					
<sup>1</sup> Undertaking for the Collective directives that allow collective	e Investment of Transferable Securities funds (UCITs Funds) are investment funds regulated by the European Union (EU) e investment schemes to operate throughout the EU on a passport basis on authorization from one member state.				
	nd financial year-end of the investment fund				
Date of formati					
	YYYY MM DD MM DD				
d) Reporting issuer sta	atus of the investment fund				
	rting issuer in any jurisdication of Canada? 🔲 No 🗌 Yes				
If yes, select the jurisdictions of All	of Canada in which the investment fund is a reporting issuer.				
e) Public listing status	NU         ON         PE         QC         SK         YT           of the investment fund				
	CUSIP number, provide below (first 6 digits only)				
.,	CUSIP number				
If the investment fund is public	licly listed, provide the names of all exchanges on which its securities are listed. Include only the names of exchanges for				
	for and received a listing, which excludes, for example, automated trading systems.				
Exchage names					
f) Net asset value (NA	V) of the investment fund				
	nvestment 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 \$500					
	YYYY MM DD				

ITEM 7 - INFORMATION A	BOUT THE DISTRIBUTIC	N					
If an issuer located outside of Canac purchasers resident in that jurisdicti should be disclosed in Item 8. The in	on of Canada only. Do not incl	lude in Ite	em 7 securitie	s issued a	s payment of a	commissions or find	ler's fees, which
a) Currency							
Select the currency or currencies in t	which the distribution was mad	de. All do	llar amounts	provided i	n the report m	ust be in Canadian	dollars.
✓ Canadian dollar	US dollar Euro	D	Other (	describe	)		
b) Distribution date(s)							
State the distribution start and end as both the start and end dates. If a distribution period covered by the a Start da	the report is being filed for second report.	urities dis			us basis, incluc		
c) Detailed purchaser inform	nation						
Complete Schedule 1 of this fo	orm for each purchaser ai	nd attac	h the schee	dule to t	he complete	ed report.	
d) Types of securities distrib	outed						
Provide the following information Instructions for how to indicate th distributed.				-	•		-
						Canadian \$	
Security code (if applicable)	Description of security		Numbe securi		Single or lowest price	Highest price	Total amount
UBS98954E123 sha	10 per unit (one commo are and one common sh chase warrant at \$0.15)	nare		0 0.1000	933,500.00		
e) Details of rights and conv	ertible/exchangeable secu	rities					
If any rights (e.g. warrants, options were distributed, provide the conv							changeable securities
Security Underlying security code	Exercise price (Canadian \$) Lowest Highest		iry date - MM-DD)	Convers ratio		cribe other items (if a	applicable)
W N T C M S	0.1500 0.1500	2018	3-12-14		1.00		
f) Summary of the distributio	n by jurisdiction and exem	ntion					
State the total dollar amount of se purchaser resides and for each exe distribution in a jurisdiction of Car This table requires a separate line purchaser resides, if a purchaser re jurisdiction. For jurisdictions within Canada, st	ecurities distributed and the nu emption relied on in Canada fo nada, include distributions to p item for: (i) each jurisdiction w esides in a jurisdiction of Canad	mber of p or that dis urchasers here a pu da, and (i	tribution. Hou s resident in t urchaser resia iii) each exem	wever, if a hat jurisdi les, (ii) eac ption relie	n issuer locate ction of Canac ch exemption r	d outside of Canad la only. elied on in the juris	a completes a diction where a
Province or country	Exemption	relied on			Number of purchasers	Total amou	nt (Canadian \$)
Alberta	NI 45-106 2.5 [Family, associates]	friends	and busin	ess		3	60,000.00
British Columbia	NI 45-106 2.5 [Family, associates]			ess	1	8	647,500.00
Québec	NI 45-106 2.30 [Isolate issuer]		_			2	65,000.00
Germany	NI 45-106 2.5 [Family, associates]					1	26,000.00
Poland	NI 45-106 2.5 [Family, associates]	friends	and busin	ess		3	50,000.00

Ontario	NI 45-106 2.5 [Family, friends and business associates]	1	85,000.00
	Total dollar amount of sec	urities distributed	933,500.00
	Total number of unique purchasers <sup>2</sup>	28	
In calculating the total numb	por of unique purchasers to which the issuer distributed securitie	c count oach nurch	aser only once regardless of whether

<sup>2</sup>In calculating the total number of unique purchasers to which the issuer distributed securities, count each purchaser only once, regardless of whether the issuer distributed multiple types of securities to, and relied on multiple exemptions for, that purchaser.

## g) Net proceeds to the investment fund by jurisdiction

If the issuer is an investment fund, provide the net proceeds to the investment fund for each jurisdiction of Canada and foreign jurisdiction where a purchaser resides.<sup>3</sup> If an issuer located outside of Canada completes a distribution in a jurisdiction of Canada, include net proceeds for that jurisdiction of Canada only. For jurisdictions within Canada, state the province or territory, otherwise state the country.

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

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

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

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

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

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

ITEM 8 - COMPENSATIO	INFORMATION	
	person (as defined in NI 45-106) to whom the issuer directly provides, or will provide, any compensation in connection Ete additional copies of this page if more than one person was, or will be, compensated.	
Indicate whether any compense	sation was paid, or will be paid, in connection with the distribution.	
🗌 No 🗹 Yes	If yes, indicate number of persons compensated.	
a) Name of person comp	pensated and registration status	
Indicate whether the person	on compensated is a registrant. 🔲 No 📝 Yes	
If the person compensated is	an individual, provide the name of the individual.	
Full legal name of indiv	vidual	
	Family name   First given name   Secondary given names	
If the person compensated is	is not an individual, provide the following information.	
Full legal name	of non-individual Mackie Research Capital	
Fi	irm NRD number 3 0 7 0 (if applicable)	
Indicate whether the person	n compensated facilitated the distribution through a funding portal or an internet-based portal.	Yes
b) Business contact infor		
If a firm NRD number is not p	provided in Item 8 (a), provide the business contact information of the person being compensated.	
Street address		
Municipality	Province/State	Ĩ
Country	Postal code/Zip code	7
Email address	Telephone number	$\exists$
c) Relationship to issuer	r or investment fund manager	
Indicate the person's relations	iship with the issuer or investment fund manager (select all that apply). Refer to the meaning of "connected" in Part he meaning of "control" in section 1.4 of NI 45-106 for the purposes of completing this section.	
	uer or investment fund manager Insider of the issuer (other than an investment fund)	
Director or officer of t	the investment fund or investment fund manager	
<ul><li>✓ None of the above</li></ul>		
d) Compensation details	\$	
Canadian dollars. Include cash services incidental to the distri	sation paid, or to be paid, to the person identified in Item 8(a) in connection with the distribution. Provide all amounts h commissions, securities-based compensation, gifts, discounts or other compensation. Do not report payments for ribution, such as clerical, printing, legal or accounting services. An issuer is not required to ask for details about, or rep rements with the directors, officers or employees of a non-individual compensated by the issuer.	
Cash commissions pa	aid 9,000.00 Security codes Security code 1 Security code 2 Security code	3
Value of all securitie distributed a compensatio	es as	
Describe to	terms of warrants, options or other rights	٦
Other compensation	m <sup>s</sup> Describe	
Total compensation pa	aid 9,000.00	
Check box if the pe	erson will or may receive any deferred compensation (describe the terms below)	
		٦
additional securities of the is	e of all securities distributed as compensation, <u>excluding</u> options, warrants or other rights exercisable to acquire ssuer. Indicate the security codes for all securities distributed as compensation, <u>including</u> options, warrants or othe e additional securities of the issuer.	r

<sup>5</sup>Do not include deferred compensation.

ITEM 9 - DIRECTORS, EXECU	IVE OFFICERS A	AND PROMO	TERS OF THE I	SSUER				
If the issuer is an investment fund	do not complete It	em 9. Procced to	o Item 10.					
Indicate whether the issuer is any of	the following (select o	all that apply).						
Reporting issuer in any jurise	liction of Canada							
Foreign public issuer								
Wholly owned subsidiary of	reporting issuer in a	any jurisdiction of	f Canada <sup>6</sup>					
Provide nam	e of reporting issuer							
Wholly owned subsidiary of	ı foreign public issue	er <sup>6</sup>						
Provide name of	oreign public issuer							
Issuer distributing eligible for	eign securities only t	to permitted clien	ts <sup>7</sup>					
If the issuer is at least one of the	ibove, do not comp	lete Item 9(a) –	(c). Proceed to Ite	<i>m 10</i> .				
<sup>6</sup> An issuer is a wholly owned subsidi securities that are required by law to <sup>7</sup> Checck this box if it applies to the co clients. Refer to the definitions of "elu definitions of "elu"	be owned by its dire prrent distribution eve	ctors, are benefic en if the issuer m	cially owned by the ade previous distri	reporting issuer butions of other t	or the foreig ypes of secu	n publ	ic issuer, respe	ctively.
If the issuer is none of the o	bove, check this bo	x and complete	ltem 9(a) - (c).					
a) Directors, executive officers	and promoters of	the issuer						
Provide the following information f territory; otherwise state the countr						da, stai	te the province of	or
Organization or company name	Family name	First given name	Secondary give names					
				Province o	r country	D	O P	
b) Promoter information								
If the promoter listed above is not a within Canada, state the province a								
Organization or company name	Family name	First given name	Secondary given names	Residential jurisdiction of individual		onship to promoter e or both if applicable)		
				Province or country	D		0	
c) Residential address of each	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 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	Forward	Casey			
	Family name	First given name		Secondary giv	ren names
Title	Director				
Name of issuer/underwriter/ investment fund manager	LeenLife Pharma Internationa	ıl Inc.			
Telephone number		Email address			
Signature	Casey Forward	Date	2016	12	23
		-	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.

Full legal name	Faris	Monita		Title Corp Admin
-	Family name	First given name	Secondary given names	
ame of company	LeenLife Pharma Int	ernational Inc.		

#### 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 a) 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. b)