Form 45-106F1 Report of Exempt Distribution

ITEM 1 - REPORT TYPE

✓ New report

Amended report

If amended, provide filing date of report that is being 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 (in Québec, Regulation 81-106 respecting Investment Fund Continuous Disclosure and Policy Statement to Regulation 81-106 respecting Investment Fund Continuous Disclosure and Policy Statement to Regulation 81-106 respecting Investment Fund Continuous Disclosure and Policy Statement to Regulation 81-106 respecting Investment Fund Continuous Disclosure and Policy Statement to Regulation 81-106 respecting Investment Fund Continuous Disclosure and Policy Statement to Regulation 81-106 respecting Investment Fund Continuous Disclosure and Policy Statement to Regulation 81-106 respecting Investment Fund Continuous Disclosure and Policy Statement to Regulation 81-106 respecting Investment Fund Continuous Disclosure and Policy Statement to Regulation 81-106 respecting Investment Fund Continuous Disclosure and Policy Statement Fund Continuous Disclosure).

Investment fund issuer

✓ Issuer (other than an investment fund)

Underwriter

ITEM 3 - ISSUER NAME AND OTHER IDENTIFIERS

Provide the following information about the issuer, or if the issuer is an investment fund, about the fund.

Full legal name	BioHarvest Sciences Inc. / BioHarves	t Sciences Inc.
Previous full legal name	CANNA-V-CELL SCIENCES INC.	
If the issuer's name changed in	the last 12 months, provide most recent	previous legal name.
Website	www.bioharvest.com	(if applicable)
If the issuer has a legal entity identifier, p	rovide below. Refer to Part B of the Insti	ructions for the definition of "legal entity identifier".
Legal entity identifier]
If two or more issuers distributed a single above.	e security, provide the full legal name(s)	of the co-issuer(s) other than the issuer named
Full legal name(s) of co-issuer(s)		(if applicable)

ITEM 4 - UNDERWRITER INFORMATION If an underwriter is completing the report, provide the underwriter's full legal name, firm NRD number, and SEDAR+ profile number. Full legal name Firm NRD number Firm NRD number SEDAR+ profile number

ITEM 5 - ISSUER INFORMATION

TEW 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 000000
<i>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.</i>
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: 🗹 0 - 49 🗌 50 - 99 🗌 100 - 499 🗌 500 or more
c) SEDAR+ profile number
Provide the issuer's SEDAR+ profile number
000036900

ITEM 6 - INVESTMENT F	UND ISSUER IN	FORMATION		
If the issuer is an investment f	iund, provide the follo	wing information.		
a) Investment fund ma	anager information	1		
Full legal name				
Firm NRD number		(if applicable)	1	
SEDAR+ profile number				
b) Type of investment	fund			
Type of investment fund that mo	st accurately identifies	the issuer (select only one).		
🗌 Money market	Equity	Fixed income	Balanced	
Alternative strategies	Cryptoasset	Other (describe)		

Indicate whether one or l	ooth of the following apply to the inves	tment fund.			
🗌 Invest primarily in c	ther investment fund issuers				
Is a UCITs Fund ¹					
	e Investment of Transferable Securities funds				an Union (EU) directives
that allow collective investmer	nt schemes to operate throughout the EU on a	passport basis on authorize	ation from one me	ember state.	
c) Net asset valu	ue (NAV) of the investment fund	ł			
Select the NAV range of th	he investment fund as of the date of th	e most recent NAV calc	ulation (Canad	ian \$).	
Under \$5M	\$5M to under \$25	M 🗌 \$25M to und	er \$100M	Date of N	AV calculation:
	00M	1B 🗌 \$1B or over			
		IB\$IBOIOVEI		YYYY	MM DD
ITEM 7 - INFORM	ATION ABOUT THE DISTRI				
	ATION ABOUT THE DISTRI	BOTION			
	de of Canada completes a distribution				
	asers resident in that jurisdiction of Co fees, in connection with the distribution				
, , , , , , , , , , , , , , , , , , , ,	h the information provided in Schedu			, , , , , , , , , , , , , , , , , , ,	
a) Currency					
				4	
Select the currency or cul dollars.	rrencies in which the distribution was i	maae. All aollar amour	ts provided in t	the report m	lust be in Canadian
🗹 Canadian dollar	🗌 US dollar 🛛 Euro Othe	r (describe)			
b) Distribution (datac				
D) DISTIBUTION (Jales				
	rt and end dates. If the report is being				
	ooth the start and end dates. If the rep l dates for the distribution period cove		urities distribu	ed on a cont	inuous basis,
			2023	10 30	
Start date	YYYY MM DD	End date	<u> </u>		
			TTT		J
c) Detailed purc	haser information				
Complete Schedule 1 oj	^f this form for each purchaser and a	ttach the schedule to	the complete	d report.	
d) Types of secu	urities distributed				
Drovido the following inf	provision for all distributions reported	on a por cocurity basis	Defer to Dart	1/12) of the 1	netructions for how
	ormation for all distributions reported ode. If providing the CUSIP number, in				
distributed.		, ,		0	
				Canadiar	n \$
Security CUSIP		Number of	Single or	Highest	
code number (if applicable)	Description of security	securities	lowest price	price	Total amount
CVN	The Notes and accrued interest a	ar 11,786,489.9700	0.0000		11,786,489.9700
			1 0.0000	1	,,,,,

				the optio mon sha	on of the res					
e) Details	of rights	s and co	onvert	ible/exc	nangeable secu	rities				
	angeable s angeable s	ecurities ecurity.	were dis	stributed,	provide the exercise	ion rat			other te	erms for each
exchangeable	Underl security		(Canad	dian \$)	Expiry date (YYYY DD)	-1/11/1-	Convers	sion ratio	Desi	cribe other terms (if applicable)
security code		L	owest	0						
CVN	CM		0.2400		2025-10-30					
WNT	CM	S (0.3000		2025-10-30					
f) Summa	ry of the	e distrib	oution	by juriso	liction and exer	nptior	<u>ו</u>			
jurisdiction where Canada, if a purc	es a separc e a purcha haser resid	ate line ite aser reside des in a f	les, if a p foreign j	ourchaser urisdiction	risdiction where a p resides in a jurisdic n. territory, otherwise	tion of	Canada,	. and (iii) ea		
Province or cou	ntry		Exe	mption re	lied on			ber of uniqu rchasers ^{2a}	ie	Total amount (Canadian \$)
Virgin Islands British		tributior sdiction			s outside of local				1	308,947.5000
Guernsey		tributior sdiction	•		s outside of local				1	2,700,000.0000
Italy		tributior sdiction			s outside of local				6	778,211.8700
United Kingdor	m	tributior sdiction	•		s outside of local				3	1,061,497.7500
Virgin Islands British	NI 4	45-106 2	.3 [Acc	redited i	nvestor]				1	1,026,375.0000
United States o America	of NI 4	45-106 2	.3 [Acc	redited i	nvestor]				4	5,639,617.8100
lsrael		tributior sdiction	•		s outside of local				1	271,840.0400

^{2a} In calculating the number of unique purchasers per row, count each purchaser only once. Joint purchasers may be counted as one purchaser.

Total number of unique purchasers^{2b}

^{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.

Total dollar amount of securities distributed

\$11,786,489.9700

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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 \$)
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.

ITEM 8 - COMPENSATION INFORMATION

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	/ provides, or и	vill provide, any coi	106) (in Québec, Regulation 45- mpensation in connection with t ill be, compensated.			
Indicate whether any co □ No ☑ Yes			<i>paid, in connection with the dist.</i> er of persons compensated.	<i>ribution.</i> 1		
a) Name of per	rson comper	nsated and regi	stration status			
Indicate whether the pe		-				
lf the person compensa	ted is an individ	dual, provide the n	-	I		
Full legal name of	individual	CHAIT	Roberto			
lf the person compensa	ted is not an in	Family name dividual, provide tl	First given nam he following information.	าย	Secondary given	names
Full legal name of	f non-individua	al				
Firi	m NRD numbe	er	(if app	olicable)		
Indicate whether the pe	rson compenso	nted facilitated the	distribution through a funding (portal or an	internet-based po	rtal
✓ No 🗌 Yes	·					
b) Business co	ntact inform	ation				
				ion of the n		
If a firm NRD number is Street address			e the business contact informati	ion of the p	erson being compe	nsatea.]
Street address]
Municipality	Jerusalem		Province/State			
Country	Israel		Postal code/Zip code	9370710		
Email address	roberto_chai	t@yahoo.com	Telephone number	972 5072	52525	
c) Relationship	to issuer or	investment fur	nd manager			
Indicate the person's rel	lationship with of the Instructio xemptions) for	the issuer or invest ons and the meani the purposes of co	tment fund manager (select all t ng of 'control' in section 1.4 of N mpleting this section.			
 Insider of the issue			-			
Director or officer	of the investm	nent fund or inves	tment fund manager			
Employee of the is	suer or invest	ment fund manag	ger			
✓ None of the above	2					
d) Compensati	on details					

Provide details of all compensation paid, or to be paid, to the person identified in Item 8(a) in connection with the distribution. Provide all amounts in Canadian dollars. Include cash commissions, securities-based compensation, gifts, discounts or other compensation. Do not report payments for services incidental to the distribution, such as clerical, printing, legal or accounting services. An issuer is not required to ask for details about, or report on, internal allocation arrangements with the directors, officers or employees of a non-individual compensated by the issuer.

Cash commissions paid	148719.2400			
Value of all securities distributed as compensation ⁴				
Security codes	Security code 1	Security code 2	Security code 3	
Describe terms of warrants, options or other rights				
Other compensation ⁵				
Describe				
Total compensation paid	148719.24			
Check box if the person will or may receive any def				
⁴ Provide the aggregate value of all securities distributed as compensa securities of the issuer. Indicate the security codes for all securities dis acquire additional securities of the issuer.		-		
⁵ Do not include deferred compensation.				
ITEM 9 – DIRECTORS, EXECUTIVE OFFICE	RS AND PROM	NOTERS OF T	HE ISSUER	
If the issuer is an investment fund, do not complete It	em 9. Proceed to I	tem 10.		
Indicate whether the issuer is any of the following (select t	he one that applies	– if more than one	applies, select only	one).

 \checkmark Reporting issuer in a 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 foreign public issuer ⁶

Provide name of foreign public issuer

Issuer distributing only eligible foreign securities and the distribution is to permitted clients only ⁷.

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 and promoters of the issuer

Provide the following information for each director, executive officer and promoter of the issuer. For locations within Canada, state the province or territory, otherwise state the country. For "Relationship to issuer", "D" – Director, "O" – Executive Officer, "P" – Promoter.

Organization or company name	Family name	First given	Secondary given names	Business location of non-individual or residential jurisdiction of individual	Relationship to issue (select all that apply)		
		name		Province or country	D	0	Р

b) Promoter information

If the promoter listed above is not an individual, provide the following information for each director and executive officer of the promoter. For locations within Canada, state the province or territory, otherwise state the country. For "Relationship to promoter", "D" – Director, "O" – Executive Officer.

Organization or	Family	First given	, , ,	Residential jurisdiction of individual	Relationship to one or both i	-
company name	name	name	names	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, 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.

securities regulatory aut	hority or regulator, as applica	ble, that I have r	eviewed this re	nvestment fund manager, to the eport and to my knowledge, having o the extent required, complete.	;)
Name of lssuer/ investment fund	BioHarvest Science Inc.				
manager/agent					
Full legal name	RYAN	Dav	vid		
	Family name	First give	en name	Secondary given names	
Title	VP Investor Relations				
Telephone number	+1 (604) 622-1186	Email address	dave@bioharv	vest.com	
Signature	David Ryan	Date	2023	11 07	
			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			
	Family name	First given name	Secondary given names
Title			
Name of company			
Telephone number		Email address	

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.

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.