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 amended, provide filing date of report that is being amended 2016 07 22 (YYYY-MM-DD) 							
ITEM 2 - PARTY CERTIFYING THE	Report						
	t only one). For guidance regarding whether an issuer is an investment fund, refer to section 1.1 of Ind Continuous Disclosure and the companion policy to NI 81-106.						
Investment fund issuer							
✓ Issuer (other than an invest	tment fund)						
Underwriter							
ITEM 3 - ISSUER NAME AND OTH							
-	issuer, or if the issuer is an investment fund, about the fund.						
	Nuran Wireless Inc.						
	1014372 B.C. Ltd.						
	he last 12 months, provide most recent previous legal name.						
Website	www.nuranwireless.com (if applicable)						
	vide below. Refer to Part B of the Instructions for the definition of "legal entity identifier".						
Legal entity identifier							
ITEM 4 - UNDERWRITER INFORM	ATION						
	rovide the underwriter's full legal name and firm National Registration Database (NRD) number.						
Full legal name							
	Firm NRD number (if applicable)						
If the underwriter does not have a firm NRD number, provide the head office contact information of the underwriter.							
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 5 1 7 9 1 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.						
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 0 3 6 9 9 7 If the issuer does not have SEDAR profile complete item 5(d) - (h).						
d) Head office address						
Street address 2150 Cyrille-Duquet Street Province/State Québec						
Municipality Quebec Postal code/Zip code G1N 2G3						
Country Canada Telephone number 0000000000						
e) Date of formation and financial year-end						
Date of formation 2014 09 23 Financial year-end 10 31 YYYY 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.						
□ 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 6 7 0 5 9 X						
CUSIP number 6 7 0 5 9 X 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): Canada - CSE						
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						
□ \$100M to under \$500M □ \$500M to under \$1B □ \$1B or over						

ITEM 6 - INVESTMENT FU	JND ISSUER INFORMATION					
If the issuer is an investmer	nt fund, provide the following information.					
a) Investment fund manag	jer informaiton					
Full legal name						
Firm NRD number	(if applicable)					
If the investment fund manage	r 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 fun	d					
Type of investment fund that mo	st accurately identifies the issuer (select only one) .					
Money market	Equity Fixed income					
Balanced	Alternative strategies Other (describe)]				
Indicate whether one or both of t	he following apply to the investment fund .	-				
Invests primarily in oth	er investment fund issuers					
Is a UCITs Fund ¹						
	vestment of Transferable Securities funds (UCITs Funds) are investment funds regulated by the European Union (Ev restment schemes to operate throughout the EU on a passport basis on authorization from one member state.	U)				
	inancial year-end of the investment fund					
Date of formation	Financial year-end					
Date of formation	YYYY MM DD MM DD					
d) Reporting issuer status	of the investment fund					
Is the investment fund a reportin	g issuer in any jurisdication of Canada? 🔲 No 🗌 Yes					
	anada in which the investment fund is a reporting issuer.					
e) Public listing status of t						
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 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.						
Exchage names						
f) Net asset value (NAV) of	of the investment fund					
Select the NAV range of the inves	tment 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:	7				
	YYYY MM DD	_				

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, 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) Currency								,	
Select the currency or currencies in v	which the distribution was made	e. All doll	ar amounts	provided in	the report m	ust be in	Canadiar	o 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 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 2016 07 12 End date 2016 07 12									
	YYYY MM DD				YYYY	MM	DD		
c) Detailed purchaser inform	ation								
Complete Schedule 1 of this fo	orm for each purchaser and	d attacl	h the sche	dule to th	e complete	d repoi	rt.		
d) Types of securities distrib	uted					-			
Provide the following information Instructions for how to indicate the distributed.									
				[(Canadian \$		
Security code CUSIP number (if applicable)	Description of security		Numbe secur		Single or lowest price	High	est price	Total amount	
C M S 67059X106 wer	ertain of the common shares ere issued in settlement of utstanding debt at a deemed rice of \$0.15 per share.),417.00	0.150	C	0.1500	7,039,562.50	
e) Details of rights and conv	ertible/exchangeable securit	ities							
If any rights (e.g. warrants, options were distributed, provide the conv							vertible/e	xchangeable securities	
Security Underlying code security code	Exercise price (Canadian \$)	Expir	y date MM-DD)	Conversio	on		er items (if a	applicable)	
	Lowest Highest								
	on by jurisdiction and exemption		unch as one fo	r o c ch iuris	distion of Can	ada and	faraian iu	risdiction where a	
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 re	elied on			Number of purchasers	-	Total amou	nt (Canadian \$)	
British Columbia	NI 45-106 2.3 [Accredite	ed inve	stor]			2		45,000.00	
Alberta	NI 45-106 2.3 [Accredite	ed inve	stor]			1		7,500.00	
Alberta	NI 45-106 2.14 [Securitie	es for o	debt]			1		100,950.00	
Saskatchewan	NI 45-106 2.3 [Accredite	ed inve	stor]			4		77,250.00	
Québec	NI 45-106 2.3 [Accredite	ed inve	stor]			9		379,752.45	
Québec	NI 45-106 2.14 [Securitie					6		3,879,499.90	
United Arab Emirates	NI 45-106 2.3 [Accredite		-			1		11,250.00	
United States	Other					1		45,000.00	
Guernsey	NI 45-106 2.3 [Accredite	ed inve	stor]			1		24,000.00	
Cucinocy				1				,	

	Total number of unique purchasers ²	49			
	Total dollar amount of securities distributed				
United States	NI 45-106 2.14 [Securities for debt]	1	1,500,000.00		
Ontario	NI 45-106 2.14 [Securities for debt]	3	133,500.00		
Ontario	NI 45-106 2.3 [Accredited investor]	17	745,860.15		
Monaco	NI 45-106 2.3 [Accredited investor]	1	30,000.00		
United Kingdom	NI 45-106 2.3 [Accredited investor]	1	60,000.00		

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.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.

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	INFORMATION					
	son (as defined in NI 45-106) to whom the issuer directly provides, or will provide, any compensation in connecti additional copies of this page if more than one person was, or will be, compensated.	on				
Indicate whether any compensation was paid, or will be paid, in connection with the distribution.						
🗌 No 🗹 Yes	If yes, indicate number of persons compensated. 7					

a) Name of person com	pensated and regis	stration status			
Indicate whether the perso	on compensated is a r	egistrant.	No No	Ves	
If the person compensated is	s an individual, provid	e the name of the ind	ividual.		
Full legal name of indi	vidual				
	Far	nily name	First giver	n name Seco	ondary given names
If the person compensated	is not an individual, p	rovide the following i	nformation.		
Full legal name	e of non-individual	First Republic Ca	pital Corporatior	ו	
F	Firm NRD number	2 7 2	7 0	(if app	licable)
Indicate whether the perso	n compensated facilite	ted the distribution th	hrough a funding p	portal or an internet-bas	ed portal. 🗹 No 🔲 Yes
b) Business contact info	ormation				
If a firm NRD number is not	provided in Item 8 (a)	, provide the business	contact informati	ion of the person being c	compensated.
Street address					
Municipality]	Province/State	
Country			-] F	Postal code/Zip code	
Email address			1	Telephone number	
c) Relationship to issue	r or investment fun	d manager			
		-	nager (select all th	hat apply). Refer to the n	neaning of "connected" in Part
B(2) of the Instructions and t	the meaning of "contr	ol" in section 1.4 of N	l 45-106 for the pu	rposes of completing th	is section.
Connect with the iss	uer or investment fun	d manager		Insider of the issuer (ot	her than an investment fund)
Director or officer of	the investment fund	or investment fund m	anager	Employee of the issuer	or investment fund manager
None of the above					
d) Compensation detail	S				
					distribution. Provide all amounts in n. Do not report payments for
services incidental to the dist	ribution, such as clerie	cal, printing, legal or o	accounting service:	s. An issuer is not require	ed to ask for details about, or report
on, internal allocation arrang	gements with the direc	tors, officers or emplo	oyees of a non-ind	ividual compensated by	the issuer.
Cash commissions p	aid 106,1	65.01	Security codes	Security code 1	Security code 2 Security code 3
Value of all securiti distributed			·	W N T	
compensati					
Describe	terms of warrants, or	otions or other rights			ntitling the holder to acquire
					exercise price of \$0.15 per ty-four (24) months following
			the closing da		
Other compensation	on⁵	Describe			ntitling the holder to acquire
					exercise price of \$0.15 per ty-four (24) months following
			the closing da	te.	
Total compensation p					
Check box if the p	erson will or may reco	eive any deferred cor	npensation (descr	ribe the terms below)	
					r rights exercisable to acquire <u>ludina</u> options, warrants or other
rights exercisable to acquire	e additional securities				• · · · · · · · · · · · · · · · ·
⁵ Do not include deferred co	mpensation.				

a) Name of person com	pensated and regis	stration status				
Indicate whether the person compensated is a registrant.						
If the person compensated is an individual, provide the name of the individual.						
Full legal name of individual						
	Fan	nily name	First give	n name Sec	ondary given names	
If the person compensated	is not an individual, p	rovide the following	information.			
Full legal name	e of non-individual	Canaccord Genu	ity Corp.			
F	Firm NRD number	9 0 0		(if app	blicable)	
Indicate whether the persor	n compensated facilito	ited the distribution	through a funding	portal or an internet-ba	sed portal. 🗹 No 🔲 Yes	
b) Business contact info	ormation					
If a firm NRD number is not	provided in Item 8 (a)	, provide the busines	s contact informat	ion of the person being o	compensated.	
Street address						
Municipality]	Province/State		
Country			_] F	Postal code/Zip code		
Email address			-	Telephone number		
c) Relationship to issue	r or investment fun	d manager				
Indicate the person's relation	nship with the issuer o	r investment fund m			neaning of "connected" in Part	
B(2) of the Instructions and t	he meaning of "contro	ol" in section 1.4 of N	II 45-106 for the p	urposes of completing th	is section.	
Connect with the iss	uer or investment fun	d manager		Insider of the issuer (of	her than an investment fund)	
Director or officer of	the investment fund o	or investment fund n	nanager	Employee of the issuer	or investment fund manager	
None of the above						
d) Compensation details	8					
					distribution. Provide all amounts in n. Do not report payments for	
services incidental to the dist	ribution, such as clerio	cal, printing, legal or	accounting service	es. An issuer is not requir	ed to ask for details about, or report	
on, internal allocation arrang	ements with the direc	tors, officers or emp	loyees of a non-inc	lividual compensated by	the issuer.	
Cash commissions p	aid 7,60	05.00	Security codes	Security code 1	Security code 2 Security code 3	
Value of all securiti distributed				W N T		
compensati				<u> </u>	· · · · · · · · · · · · · · · · · · ·	
Describe	terms of warrants, op	otions or other rights	100,700 Wana		titling the holder to acquire an	
			additional cor	nmon share at an exe	ercise price of \$0.15 per hty-four (24) months following	
			the closing da			
Other compensation	on⁵	Describe			titling the holder to acquire an	
					ercise price of \$0.15 per hty-four (24) months following	
			the closing da	ate.		
Total compensation p	.,	05.00				
Check box if the p	erson will or may rece	eive any deferred co	mpensation (desc	ribe the terms below)		
					r rights exercisable to acquire <u>cluding</u> options, warrants or other	
rights exercisable to acquire ⁵Do not include deferred co	e additional securities			. ,		
	npensauon.					

a) Name of person com	pensated and regis	stration status				
Indicate whether the person compensated is a registrant.						
If the person compensated is an individual, provide the name of the individual.						
Full legal name of individual						
	Fan	nily name	First given	name Sec	condary given names	
If the person compensated	is not an individual, p	rovide the following	information.			
Full legal name	of non-individual	PI Financial Corp).			
F	Firm NRD number	5 2 9	0	(if ap	plicable)	
Indicate whether the persor	n compensated facilita	ted the distribution	through a funding p	ortal or an internet-ba	sed portal. 🗸 No 🗌 Yes	
b) Business contact info	rmation					
If a firm NRD number is not	provided in Item 8 (a)	, provide the busine	s contact information	on of the person being	compensated.	
Street address						
Municipality			7	Province/State		
Country			_] P	ostal code/Zip code		
Email address				Telephone number		
c) Relationship to issue	r or investment fun	d manager				
					meaning of "connected" in Part	
B(2) of the Instructions and t	-					
	uer or investment fun	-			ther than an investment fund)	
	the investment fund o	or investment fund r		mployee of the issue	r or investment fund manager	
✓ None of the above						
Canadian dollars. Include cas	sation paid, or to be p h commissions, secur ribution, such as cleric	ities-based compens al, printing, legal or	ation, gifts, discount accounting services	s or other compensatic . An issuer is not requi	distribution. Provide all amounts in on. Do not report payments for red to ask for details about, or report of the issuer.	
Cash commissions p	aid 1,80	00.00	Coourity codes	Security code 1	Security code 2 Security code 3	
Value of all securiti			Security codes	W N T		
distributed compensation						
Describe	terms of warrants, op	tions or other rights	additional com	mon share at an ex for a period of twe	titling the holder to acquire an ercise price of \$0.15 per nty-four (24) months following	
Other compensation ⁵ Describe						
Total compensation p	aid 1,80	00.00				
Check box if the p	erson will or may rece	eive any deferred co	mpensation (descri	be the terms below)		

a) Name of person com	pensated and registrat	ion status				
Indicate whether the perso	n compensated is a regist	rant.	No No	✓ Yes		
If the person compensated is an individual, provide the name of the individual.						
Full legal name of indiv	/idual					
	Family n	ame	First given	n name Sec	ondary given names	
If the person compensated i	s not an individual, provia	le the following i	nformation.			
Full legal name	of non-individual Ind	ustrial Alliance	Securities Inc.			
F	irm NRD number 1	5 4	0 0	(if app	licable)	
Indicate whether the person	compensated facilitated	the distribution th	hrough a funding p	portal or an internet-bas	ed portal. 🗹 No 🗌 Yes	
b) Business contact info	rmation					
If a firm NRD number is not	provided in Item 8 (a), pro	vide the business	contact informati	on of the person being o	compensated.	
Street address						
Municipality]	Province/State		
Country] Р	ostal code/Zip code		
Email address				Telephone number		
c) Relationship to issuer	or investment fund ma	anager				
Indicate the person's relation B(2) of the Instructions and t					neaning of "connected" in Part is section.	
	uer or investment fund ma				her than an investment fund)	
Director or officer of	the investment fund or inv	vestment fund ma	anager 🗌	Employee of the issuer	or investment fund manager	
None of the above						
d) Compensation details	3					
Canadian dollars. Include cas	h commissions, securities- ibution, such as clerical, p	based compensa rinting, legal or c	tion, gifts, discount accounting services	ts or other compensatio 5. An issuer is not requir	distribution. Provide all amounts in n. Do not report payments for ed to ask for details about, or report the issuer.	
Cash commissions pa	aid 360.0	0	Socurity codes	Security code 1	Security code 2 Security code 3	
Value of all securitie distributed			Security codes	W N T		
compensatio						
Describe	terms of warrants, options	s or other rights	additional com	nmon share at an exe e for a period of twer	tling the holder to acquire an ercise price of \$0.15 per ty-four (24) months following	
Other compensation ⁵ Describe Describe Describe 2,400 Warrants. Each warrant entitling the holder to acquire an additional common share at an exercise price of \$0.15 per common share for a period of twenty-four (24) months following the closing date.						
Total compensation pa	aid 360.0	0				
Check box if the pe	erson will or may receive	any deferred cor	npensation (descr	ibe the terms below)		
	ssuer. Indicate the securit additional securities of the	ty codes for all se			r rights exercisable to acquire <u>luding</u> options, warrants or other	

a) Name of person com	pensated and regis	tration status				
Indicate whether the perso	on compensated is a re	egistrant.	No No	✓ Yes		
If the person compensated is an individual, provide the name of the individual.						
Full legal name of indi	vidual					
	Fam	ily name	First give	n name Sec	ondary given names	
If the person compensated	is not an individual, pr	ovide the following in	nformation.			
Full legal name	e of non-individual	Leede Jones Gab	le Inc.			
F	Firm NRD number	5 7 7	0	(if app	licable)	
Indicate whether the perso	n compensated facilita	ted the distribution th	hrough a funding	portal or an internet-bas	ed portal. 🗹 No 🔲 Yes	
b) Business contact info	ormation					
If a firm NRD number is not	provided in Item 8 (a),	provide the business	contact informat	ion of the person being o	compensated.	
Street address						
Municipality]	Province/State		
Country			-] i	Postal code/Zip code		
Email address			-	Telephone number		
c) Relationship to issue	r or investment fund	l manager				
					neaning of "connected" in Part	
B(2) of the Instructions and t	-		1 45-106 for the p			
	uer or investment fund	-			her than an investment fund)	
	the investment fund c	r investment fund ma	anager	Employee of the issuer	or investment fund manager	
✓ None of the above						
d) Compensation detail						
					distribution. Provide all amounts in n. Do not report payments for	
services incidental to the dist	ribution, such as cleric	al, printing, legal or a	accounting service	es. An issuer is not requir	ed to ask for details about, or report	
on, internal allocation arrang	ements with the direc	tors, officers or emplo	oyees of a non-inc	lividual compensated by	the issuer.	
Cash commissions p	aid 1,80	0.00	Security codes	Security code 1	Security code 2 Security code 3	
Value of all securiti distributed				W N T		
compensati						
Describe	terms of warrants, op	tions or other rights			titling the holder to acquire an	
			additional cor	nmon share at an exe re for a period of twer	ercise price of \$0.15 per ty-four (24) months following	
			the closing da			
Other compensation	on ⁵	Describe			titling the holder to acquire an	
					ercise price of \$0.15 per ity-four (24) months following	
			the closing da	ate.		
Total compensation p	.,	0.00				
Check box if the p	erson will or may rece	ive any deferred cor	npensation (desc	ribe the terms below)		
					r rights exercisable to acquire <u>luding</u> options, warrants or other	
rights exercisable to acquire	e additional securities			, , <u></u>		
⁵ Do not include deferred co	препзаноп.					

a) Name of person com	pensated and regis	stration status				
Indicate whether the perso	on compensated is a r	egistrant.	No 🔽	🖉 Yes		
If the person compensated is an individual, provide the name of the individual.						
Full legal name of indi	vidual					
	Far	nily name	First given name	e Secondar	y given names	
If the person compensated	is not an individual, p	rovide the following	information.			
Full legal name	e of non-individual	Mackie Researd	h Capital Corporation			
F	Firm NRD number	3 0	7 0	(if applicab	ole)	
Indicate whether the persor	n compensated facilite	ted the distributior	through a funding portal	l or an internet-based p	ortal. 🗹 No 🗌 Yes	
b) Business contact info	ormation					
If a firm NRD number is not	provided in Item 8 (a)	, provide the busin	ess contact information of	the person being comp	ensated.	
Street address						
Municipality			7	Province/State		
Country			 Posta	Il code/Zip code		
Email address			 Tele	ephone number		
c) Relationship to issue	r or investment fun	d manager				
Indicate the person's relation	nship with the issuer o	r investment fund i				
B(2) of the Instructions and t	-					
Connect with the iss	uer or investment fun	d manager	Inside	er of the issuer (other the	han an investment fund)	
Director or officer of	the investment fund o	or investment fund	manager 🗌 Empl	oyee of the issuer or in	vestment fund manager	
None of the above						
d) Compensation details	8					
Provide details of all compen Canadian dollars. Include cas					ibution. Provide all amounts in	
					ask for details about, or report	
on, internal allocation arrang	ements with the direc	tors, officers or em	ployees of a non-individud	al compensated by the is	ssuer.	
Cash commissions p	aid 1,3	50.00	Security codes	Security code 1 Sec	curity code 2 Security code 3	
Value of all securiti distributed			·	W N T		
compensati						
Describe	terms of warrants, op	otions or other right	s 9,000 Warrants. Ea	ach warrant entitling	the holder to acquire an	
			additional common	share at an exercise	e price of \$0.15 per our (24) months following	
			the closing date.	a period of twenty-ic		
Other compensation	on⁵	Describ			the holder to acquire an	
				n share at an exercise a period of twenty-fo	e price of \$0.15 per our (24) months following	
			the closing date.			
Total compensation p	1 -	50.00				
Check box if the p	erson will or may rece	eive any deferred o	ompensation (describe th	ie terms below)		
⁴ Provide the aggregate valu additional securities of the i					ts exercisable to acquire og options, warrants or other	
rights exercisable to acquire	e additional securities			eeperieu.ori, <u>meidum</u>		
⁵ Do not include deferred co	mpensation.					

a) Name of person com	pensated and regis	stration status				
Indicate whether the perso	on compensated is a r	egistrant.	No No	✓ Yes		
If the person compensated is an individual, provide the name of the individual.						
Full legal name of indi	vidual					
	Far	nily name	First given	name Seco	ondary given names	
If the person compensated	is not an individual, p	rovide the following i	nformation.			
Full legal name	e of non-individual	MacDougall, Mac	Dougall & MacTie	er		
F	Firm NRD number	2 1 2	0	(if app	licable)	
Indicate whether the perso	n compensated facilite	ted the distribution t	hrough a funding po	ortal or an internet-bas	ed portal. 🗹 No 🗌 Yes	
b) Business contact info	ormation					
If a firm NRD number is not	provided in Item 8 (a)	, provide the busines	s contact informatio	n of the person being c	ompensated.	
Street address						
Municipality]	Province/State		
Country			-] Pc	ostal code/Zip code		
Email address			- .	Telephone number		
c) Relationship to issue	r or investment fun	d manager				
Indicate the person's relation	nship with the issuer o	r investment fund ma			neaning of "connected" in Part	
B(2) of the Instructions and t	-					
	uer or investment fun	•			ner than an investment fund)	
Director or officer of	the investment fund	or investment fund m	anager 🗌 E	mployee of the issuer	or investment fund manager	
None of the above						
d) Compensation detail	S					
					distribution. Provide all amounts in n. Do not report payments for	
services incidental to the dist	ribution, such as clerie	cal, printing, legal or	accounting services.	An issuer is not require	ed to ask for details about, or report	
on, internal allocation arrang	gements with the direc	ctors, officers or empl	oyees of a non-indiv	vidual compensated by	the issuer.	
Cash commissions p	aid 10,6	20.00	Security codes	Security code 1	Security code 2 Security code 3	
Value of all securiti distributed				W N T		
compensati						
Describe	terms of warrants, or	otions or other rights	70,800 Warrant	ts. Each warrant ent	itling the holder to acquire an	
			additional comr	non share at an exe	rcise price of \$0.15 per ty-four (24) months following	
			the closing date			
Other compensation	on⁵	Describe			itling the holder to acquire an	
					rcise price of \$0.15 per ty-four (24) months following	
			the closing date	9.		
Total compensation p	- / -	20.00				
Check box if the p	erson will or may rec	eive any deferred cor	mpensation (descrit	be the terms below)		
					rights exercisable to acquire luding options, warrants or other	
rights exercisable to acquire	e additional securities					
⁵ Do not include deferred co	mpensation.					

Item 9 -	DIRECTORS, EXECUTIV	/E OFFICERS A	ND PROMO	TERS OF THE I	SSUER				
If the iss	suer is an investment fund, o	lo not complete Ite	em 9. Procced to	o Item 10.					
Indicate	Indicate whether the issuer is any of the following (select all that apply).								
V R	Reporting issuer in any jurisdiction of Canada								
🗌 F	oreign public issuer								
□ v	Wholly owned subsidiary of a reporting issuer in any jurisdiction of Canada ⁶								
	Provide name of reporting issuer								
□ v	Vholly owned subsidiary of a f	oreign public issuei	<u></u> 6						
	Provide name of for	eign public issuer							
🗌 Is	ssuer distributing eligible foreig	gn securities only to	permitted clien	ts ⁷					
If the is	suer is at least one of the ab	ove, do not compl	ete Item 9(a) –	(c). Proceed to Ite	m 10.				
securities ⁷ Checck t	er is a wholly owned subsidiary that are required by law to be this box if it applies to the curr efer to the definitions of "eligit	owned by its directed by its directed by its directed by its distribution event distribution events and the second by the second	ctors, are benefic in if the issuer ma	ially owned by the ade previous distri	reporting issuer butions of other t	or the foreign types of secu	n public	c issue	er, respectively.
	f the issuer is none of the ab	ove, check this bo	x and complete	ltem 9(a) - (c).					
a) Dire	ectors, executive officers a	nd promoters of	the issuer						
	the following information for						la, state	e the p	rovince 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 name Secondary given names Business location of non-individual or residentail jurisdiction of individual Relationship to issuer (select all that apply)								
					Province of	or country	D	0	P
b) Pro	moter information			1			I		
If the pi	romoter listed above is not an Canada, state the province or t		-				-		
Org	Organization or company name Family name First given name Secondary given names Residential jurisdiction of individual Relationship to promoter (select one or both if applicable)								
					Province or country	D		0	
-,	sidential address of each in								
	e Schedule 2 of this form pro ed report. Schedule 2 also re					m 9(a) and (b) and	attac	h to the

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	Bedard	Martin			
	Family name	First given name	9	Secondary giv	ven names
Title	Co-President and Co-CEO				
Name of issuer/underwriter/ investment fund manager	Nuran Wireless Inc.				
Telephone number	4189147484	Email address	martin.be	dard@nuranv	wireless.co
Signature	"Martin Bedard"	Date	2016	09	28
			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 indi	vidual certifying the repo	rt	

Full legal name	Koleszar	Alissa		Title	Securities Paralegal	
	Family name	First given name	Secondary given names			-
Name of company	Clark Wilson LLP					
Telephone number	6048917720	E	mail address akolesza	r@cwilson.c	om	

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