Form 45-106F1 Report of Exempt Distribution

BCSC EDER Reference Number 9235496

ITEM 1 - REPORT TYPE										
New report										
Amended report If amended, provide filing date of report that is being amended 2020 09 03 (YYYY-MM-DD)										
ITEM 2 - PARTY CERTIFYIN	IG THE	Repor [.]	Г							
Indicate the party certifying the rep Instrument 81-106 Investment Fun									vestment fund, refer to sec	tion 1.1 of National
Investment fund issu	ler									
✓ Issuer (other than ar	n invest	ment fui	nd)							
			,							
ITEM 3 - ISSUER NAME AN										
Provide the following information about the issuer, or if the issuer is an investment fund, about the fund.										
_	gal name Gold Plus Mining Inc.									
Previous full legal	egal name Syd Financial Inc.									
If the issuer's name changed in the last 12 months, provide most recent previous legal name.										
W	/ebsite	goldplu	sminir	ng.com				(if applicabl	e)	
If the issuer has a legal entity ident	tifier <u>,</u> pro	ide below/	. Refer t	to Part B	of the l	nstructio	ons for th	he definition	of "legal entity identifier".	
Legal entity ide	entifier									
If two or more issuers distributed a	ı single se	curity, pro	vide the	e full lega	l name	(s) of th	e co-issu	er(s) other th	an the issuer named abov	<i>'e</i> .
Full legal name(s) of co-iss	suer(s)							(if applicabl	e)	
ITEM 4 - UNDERWRITER IN	IFORM	ATION								
If an underwriter is completing the report, provide the underwriter's full legal name and firm NRD number.										
Full legal name										
Firm NRD number							(if app	licable)		
If the underwriter does not have a	firm NRD	number,	provide	the head	office	contact	informati	ion of the un	derwriter.	
Street address										
Municipality							Provi	ince/State		7
Country						Pos	tal code	e/Zip code		7
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 2 1 2 2 9 9						
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: 🗹 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 7 4 4 5						
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 Financial year-end						
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.						
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
S100M to under \$500M	S500M to under \$1B	S1B or over

If the issue is an investment fund, provide the following information: a) Investment fund manager information Full legal name Furn NRD number 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 Guntry Postal code/Zip code Telephone number D Type of investment fund Tree of investment fund that most accurately identifies the issuer (select only one). Alternative strategies Cryptoasset Other (describe) Indicate whether one or both of the following apply to the investment fund. Investment fund that most accurately identifies the issuer (select only one). Alternative strategies Cryptoasset Other (describe) Indicate whether one or both of the following apply to the investment fund. Investment fund that most accurately identifies the issuer (select only one). Indicate whether one or both of the following apply to the investment fund. Investment fund issuers Is a UCIT's Fund' 'understaining for the Collective Investment fund issuers Is a UCIT's Fund' 'understaining for the Collective Investment of Transferable Securities funds (UCIT's Funds) are investment funds regulated by the European Union (C) Date of formation and financial year-end of the investment fund Suppresent fund a reporting issuer in any jurisdication of Canada? No Yes It he investment fund a reporting issuer in any jurisdication of Canada? No Yes It he investment fund hars a CUSP number, provide below (first 6 digits only) CUSP number On O Public listing status of the investment fund is a reporting issuer. All All All </th						
Full legal name						
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						
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CUSIP number						
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 \$25M						
\$100M to under \$500M \$500M to under \$1B \$1B or over Date of NAV calculation:						

ITEM 7 - INFORMATION ABOUT THE DISTRIBUTION

purchasers connectior	s resident in that ju	risdiction of Canad	a only. Do no	ot include in	diction of Canada, inc. h Item 7 securities issu information provided	ed as payment	of comm	nissions or fir	nder's fees in
a) Cur	rency								
Select the currency or currencies in which the distribution was made. All dollar amounts provided in the report must be in Canadian dollars.									
Canadian dollar US dollar Euro Other (describe)									
b) Dist	tribution date(s)					<u>_</u>			
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 2020 08 24 End date 2020 08 24									
		YYYY	MM	DD		YYYY	MM	DD	
c) Det	ailed purchaser i	nformation							
Complet	te Schedule 1 of	this form for ea	ich purcha	ser and a	ttach the schedule	e to the comp	oleted r	eport.	
d) Typ	es of securities of	distributed							
					security basis. Refer to ISIP number assigned				w to indicate the
								Canadian \$	
Security code	CUSIP number (if applicable)	Description	on of security		Number of securities	Single or lowest price	Hiç	ghest price	Total amount
Units. Each unit consists of one common share and one transferable share purchase warrant. Each warrant entitles the holder to acquire one common share at a price of \$0.30 per share for two years.			ase titles the nmon	5,730,000.0	0 0.15		0.2000	894,500.00	
e) Det	ails of rights and	convertible/exch	nangeable	securities	-		•		
					e price and expiry dat rms for each convertil				changeable securities
exchange	Convertible / exchangeable security code Underlying security code Exercise price (Canadian \$) Lowest Highest			est	Expiry date (YYYY- MM-DD)	Conversion ratio	De	escribe other items (if applicable)	
WN	ТСМ	S 0.3000	C		2022-08-24 1	1			
f) Sum	nmary of the distr	ibution by jurisdi	iction and e	exemption					
purchaser distributio This table purchaser jurisdiction	resides and for eac on in a jurisdiction c requires a separate resides, if a purcha	h exemption relied f Canada, include d line item for: (i) ec ser resides in a juri	on in Canad distributions ach jurisdictio sdiction of C	la for that d to purchase on where a p anada, and	Fpurchasers for each j istribution. However, i ors resident in that juri ourchaser resides, (ii) (iii) each exemption r state the country.	if an issuer locc isdiction of Car each exemption	ited outs ada only n relied o	ide of Canad n in the juris	a completes a diction where a
	Province or country		Exemp	otion relied or	1	Number of unique ²⁸ purchasers		Total amount (Canadian \$)	
Brit	tish Columbia	NI 45-106	2.3 [Accre	edited inve	estor]		10		394,500.00
		NI 45-106	NI 45-106 2.3 [Accredited investor]			14			372,500.00
	Ontario	111 40 100 2	2.3 [Accre		NI 45-106 2.3 [Accredited investor]				
	Ontario Québec		-		•		2		30,000.00
Sa			2.3 [Accre	edited inve	estor]		2 1		30,000.00 2,250.00

United States	NI 45-106 2.3 [Accredited investor]	1	30,000.00
Germany	NI 45-106 2.3 [Accredited investor]	1	50,250.00
	804 500 00		
		curities distributed	894,500.00

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

^{2b} In calculating the total number of unique purchasers to which the issuer distributed securities, count each purchaser only once, regardless of whether the issuer distributed multiple types of securities to, and relied on multiple exemptions for, that purchaser.

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)

Ітем 8 - Сс	OMPENSATIO	N INFORMATION	
		rson (as defined in NI 45-106) to whom the issuer directly provides, litional copies of this page if more than one person was, or wil	
Indicate when	ther any compens	ation was paid, or will be paid, in connection with the distribution.	
🗌 No	✓ Yes	If yes, indicate number of persons compensated.	5

5

a) Name of person compe	nsated and regis	stration	status								
Indicate whether the person com	pensated is a regist	rant.		No No		\checkmark	Yes				
If the person compensated is an i	If the person compensated is an individual, provide the name of the individual.										
Full legal name of individ	Full legal name of individual										
		Family n	ame		First	given na	ame		Seco	ndary given	names
If the person compensated is not	If the person compensated is not an individual, provide the following information.										
Full legal name c	f non-individual	Canad	ccord Genur	ity Corp.							
Fin	Firm NRD number 9 0 0 (if applicable)										
Indicate whether the person compensated facilitated the distribution through a funding portal or an internet-based portal. Ves											
b) Business contact inform	nation										
If a firm NRD number is not prov	ided in Item 8 (a), p	orovide	the business co	ontact infor	mation o	of the p	person b	eing com	pensated.		
Street address											
Municipality						Pi	rovince	/State			
Country]	Pc	ostal c	ode/Zip	o code			
Email address]	-	Telepł	hone n	umber			
c) Relationship to issuer o	r investment fund	d mana	ager								
Indicate the person's relationship with the issuer or investment fund manager (select all that apply). Refer to the meaning of "connected" in Part B(2) of the Instructions and the meaning of "connected" in Part B(2) of the Instructions and the meaning of "control" in section 1.4 of NI 45-106 for the purposes of completing this section.											
Connect with the issue						-	•		er than an	investment	t fund)
Director or officer of the	e investment fund o	or inves	tment fund ma	anager		mploye	ee of the	e issuer o	or investme	ent fund ma	inager
✓ None of the above				5		1 - 7					
d) Compensation details											
Provide details of all compensation Canadian dollars. Include cash co incidental to the distribution, such allocation arrangements with the	mmissions, securition as clerical, printing	es-baseo g, legal	d compensatio or accounting	n, gifts, dis services. A	counts o n issuer i	r other is not r	[.] comper equired	nsation. E to ask foi	Do not repo	rt payment.	s for services
Cash commissions paid	2,4	00.00				:	Security	code 1	Security co	ode 2 Sec	curity code 3
Value of all securities distributed as compensation			\$	Security co	des		W N	Т			
Describe te	rms of warrants, op	otions o	r other rights							older to ac are for two	
Other compensation ⁵	5		Describe								
Total compensation paid	2,40	00.00									
Check box if the pers	son will or may rece	eive any	/ deferred con	npensation	(describ	be the t	terms be	elow)			
⁴ Provide the aggregate value of additional securities of the issue rights exercisable to acquire add ⁵ Do not include deferred compe-	er. Indicate the secu ditional securities o	irity cod	des for all secu	on, <u>excludii</u> urities distr	n <u>g</u> option ibuted as	ns, wai s comp	rrants or pensatio	r other rig n, <u>includ</u>	nhts exercis ing options	sable to acc s, warrants	uire סr other

a) Name of person compensate	d and registratio	on status						
Indicate whether the person compensat	ed is a registrant.		No No	\checkmark	Yes			
If the person compensated is an individu	If the person compensated is an individual, provide the name of the individual.							
Full legal name of individual								
	Family	name	Fi	rst given n	ame	Secor	ndary given names	
If the person compensated is not an ind	If the person compensated is not an individual, provide the following information.							
Full legal name of non-	egal name of non-individual Mackie Research Capital Corporation							
Firm NR	Firm NRD number 3 0 7 0 (if applicable)							
Indicate whether the person compensated facilitated the distribution through a funding portal or an internet-based portal.								
b) Business contact information	b) Business contact information							
If a firm NRD number is not provided in	Item 8 (a), provid	e the business co	ontact informatio	on of the	person beii	ng compensated.		
Street address								
Municipality				F	rovince/S	State		
Country				Postal o	code/Zip o	code		
Email address				Telep	hone nun	nber		
c) Relationship to issuer or inve	stment fund mai	nager	-					
Indicate the person's relationship with the issuer or investment fund manager (select all that apply). Refer to the meaning of "connected" in Part B(2) of the Instructions and the meaning of "control" in section 1.4 of NI 45-106 for the purposes of completing this section.								
Connect with the issuer or inv				-	-	ier (other than an i	investment fund)	
Director or officer of the inves		-				ssuer or investme		
				спроу		souer of investme	nit fund manager	
✓ None of the above								
d) Compensation details			· · · · · · · · · · · · · · · · · · ·				· · · · · ·	
Provide details of all compensation paid Canadian dollars. Include cash commiss								
incidental to the distribution, such as cle allocation arrangements with the directo							out, or report on, internal	
Cash commissions paid	1,800.00	-	individual comp		-			
Value of all securities				-	Security co	de 1 Security co	de 2 Security code 3	
distributed as compensation ⁴	Security codes							
Describe terms of	warrants, options	or other rights				nt entitles the ho of \$0.30 per sha	older to acquire are for two years.	
Other compensation ⁵		Describe						
Total compensation paid	1,800.00							
Check box if the person wil	or may receive a	ny deferred con	npensation (des	cribe the	terms belo	ow)		
⁴ Provide the aggregate value of all sec	urities distributed	as compensatio	on. excludina on	otions. wa	nrrants or o	ther rights exercis	able to acquire	
additional securities of the issuer. Indic rights exercisable to acquire additional	ate the security c	odes for all sec	urities distributed	d as com	pensation,	including options,	, warrants or other	
⁵ Do not include deferred compensation								

a) Name of person compensated and r	gistration status							
Indicate whether the person compensated is a re	istrant. 🗌 No	✓ Yes						
If the person compensated is an individual, provide the name of the individual.								
Full legal name of individual								
	Family name F	First given name Secondary given names						
If the person compensated is not an individual, provide the following information.								
Full legal name of non-individ	of non-individual Industrial Alliance Securities Inc.							
Firm NRD numb	Firm NRD number 1 5 4 0 0 (if applicable)							
Indicate whether the person compensated facilitated the distribution through a funding portal or an internet-based portal. Ves								
b) Business contact information								
If a firm NRD number is not provided in Item 8), provide the business contact informat	ion of the person being compensated.						
Street address								
Municipality		Province/State						
Country		Postal code/Zip code						
Email address		Telephone number						
c) Relationship to issuer or investment	c) Relationship to issuer or investment fund manager							
Indicate the person's relationship with the issuer or investment fund manager (select all that apply). Refer to the meaning of "connected" in Part B(2) of the Instructions and the meaning of "control" in section 1.4 of NI 45-106 for the purposes of completing this section.								
Connect with the issuer or investment		Insider of the issuer (other than an investment fund)						
Director or officer of the investment fu		Employee of the issuer or investment fund manager						
✓ None of the above								
d) Compensation details								
		a) in connection with the distribution. Provide all amounts in nts or other compensation. Do not report payments for services						
incidental to the distribution, such as clerical, pri allocation arrangements with the directors, office		uer is not required to ask for details about, or report on, internal nensated by the issuer						
	,200.00							
Value of all securities		Security code 1 Security code 2 Security code 3 W N T						
distributed as compensation ⁴	Security codes							
Describe terms of warrant		arrants. Each warrant entitles the holder to acquire on share at a price of \$0.30 per share for two years.						
Other compensation ⁵	Describe							
Total compensation paid 2	,200.00							
Check box if the person will or may	eceive any deferred compensation (de	scribe the terms below)						
⁴ Provide the aggregate value of all securities of	tributed as compensation. excluding o	ptions, warrants or other rights exercisable to acquire						
additional securities of the issuer. Indicate the rights exercisable to acquire additional securiti	ecurity codes for all securities distribute	ed as compensation, <u>including</u> options, warrants or other						
⁵ Do not include deferred compensation.								

Indicate whether the person compensated is a registrant.							
Full legal name of individual							
Family name First given name Secondary given names If the person compensated is not an individual, provide the following information. Full legal name of non-individual EMD Financial Inc. Firm NRD number 3 6 4 8 0 Indicate whether the person compensated facilitated the distribution through a funding portal or an internet-based portal. No Yes D Business contact information If a firm NRD number is not provided in Item 8 (a), provide the business contact information of the person being compensated. Street address Municipality Country Postal code/Zip code Email address Indicate the person's relationship with the issuer or investment fund manager (select all that apply). Refer to the meaning of "connected" in Part B(2) of the Instructions and the meaning of "connected" in Part B(2) of the Instructions and the meaning of "connected" in Part B(2) of the Instructions and the meaning of "connected" in 14 of NI 45-106 for the purposes of completing this section. Imdicate the person's relationship with the issuer or investment fund manager Indicate the above Province of the issuer or investment fund manager Insider of the issuer or investment fund manager Insider of the issuer or investment fund manager Insider of the issuer or investment fund manager Connect with the issuer or investment fund manager Insider of the issuer or investment fund manager Connect with the discribution, Provide all amounts in formation in the distribution, such as clerical, printing, legal or accounting services. An issuer is not report payments for services incidential to the distribution, such as clerical, prin							
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Street address							
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Cash commissions paid 4.020.00							
Volue of all accurities							
distributed as compensation ⁴							
Describe terms of warrants, options or other rights 26,800 Warrants. Each warrant entitles the holder to acquire one common share at a price of \$0.30 per share for two years.							
Other compensation ⁵ Describe							
Total compensation paid 4,020.00							
Check box if the person will or may receive any deferred compensation (describe the terms below)							
⁴ Provide the aggregate value of all securities distributed as compensation, <u>excluding</u> options, warrants or other rights exercisable to acquire							
additional securities of the issuer. Indicate the security codes for all securities distributed as compensation, <u>including</u> options, warrants or other rights exercisable to acquire additional securities of the issuer.							

a) Name of person compensate	d and registratio	n status						
Indicate whether the person compensat	ed is a registrant.		No No	 ` 	Yes			
If the person compensated is an individ	ual, provide the na	me of the indivi	dual.					
Full legal name of individual								
	Family	name	Firs	st given nar	me	Secondary given names		
If the person compensated is not an ind	-	-						
Full legal name of non-	individual Ray	mond James	Ltd.					
Firm NR	D number 8	2 4	0		(if app	plicable)		
Indicate whether the person compensat	ed facilitated the d	istribution throu	igh a funding por	tal or an i	internet-based	portal. 🗸 No 🗌 Yes		
b) Business contact information								
If a firm NRD number is not provided ir	Item 8 (a), provide	e the business co	ontact information	n of the pe	erson being cor	mpensated.		
Street address								
Municipality				Pro	ovince/State			
Country			F	Postal co	ode/Zip code			
Email address				Teleph	one number			
c) Relationship to issuer or investment fund manager								
Indicate the person's relationship with t the Instructions and the meaning of "co								
Connect with the issuer or inv				-	-	ther than an investment fund)		
		-						
Director or officer of the investment fund or investment fund manager Employee of the issuer or investment fund manager								
✓ None of the above								
d) Compensation details								
Provide details of all compensation paid Canadian dollars. Include cash commiss incidental to the distribution, such as cle	ions, securities-bas	ed compensatio	n, gifts, discounts	or other o	compensation.	Do not report payments for services		
allocation arrangements with the directo						or details about, or report on, and mat		
Cash commissions paid	2,400.00			S	Security code 1	Security code 2 Security code 3		
Value of all securities distributed as compensation ⁴] :	Security codes	V	V N T			
Describe terms of	warrants, options	or other rights				titles the holder to acquire 0.30 per share for two years.		
Other compensation ⁵		Describe						
Total compensation paid	2,400.00]						
Check box if the person will or may receive any deferred compensation (describe the terms below)								
⁴ Provide the aggregate value of all sec additional securities of the issuer. India rights exercisable to acquire additiona	cate the security co securities of the is	odes for all secu						
⁵ Do not include deferred compensation	1.							

ITEM 9 - DIRECTORS, EXECU	TIVE OFFICERS	AND PROMOT	ERS OF THE ISS	SUER						
If the issuer is an investment fund	d, do not complete	Item 9. Procced to	Item 10.							
Indicate whether the issuer is any of the following (select the one that applies - if more than one applies, select only one).										
Reporting issuer in any juris	diction of Canada									
Foreign public issuer										
Wholly owned subsidiary of	a reporting issuer i	n any jurisdiction of	Canada ⁶							
Provide nar	ne of reporting issue	ər]		
Wholly owned subsidiary of a foreign public issuer ⁶										
Provide name of	foreign public issue	er								
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.										
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										
				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 company name	Family name First given name	Secondary given names	Residential jurisdiction of individual	jurisdiction of individual (select o		tionship to promoter one or both if applicable)				
				Province or	D		C			
				country						
				country						

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 exemt 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	Gold Plus Mining Inc.							
Full legal name	Smyl	5	Stanley					
	Family name	First given name		Secondary given names				
Title	CEO, Director							
Telephone number	6047854229	Email address	spence	cer@goldplusmini		com		
Signature	Spencer Smyl	Date	2020) 09	04			
			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	Adam	Negar			Title	Consultant
	Family name	First given name	Secondary	given names		
Name of company	Gold Plus Mining Inc.					
Telephone number	6046466906		Email address	negar@coco	ocapital.c	a

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.