# Form 45-106F1 Report of Exempt Distribution

BCSC EDER Reference Number 10047135

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 reg Instrument 81-106 Investment Fund Continuous Disclosure and the comp		vestment fund, refer to section 1.1 of National						
☐ 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 in	nvestment fund, about the fund.							
Full legal name Geologica Resource C	Corp							
Previous full legal name Cabbay Holdings Corp	).							
If the issuer's name changed in the last 12 months, provide most	recent previous legal name.							
Website geologicaresource.com	n (if applicab	le)						
If the issuer has a legal entity identifier, provide below. Refer to Part B of	the Instructions for the definition	of "legal entity identifier".						
Legal entity identifier 529900LPTUWWBL1U	JZE36							
If two or more issuers distributed a single security, provide the full legal n	ame(s) of the co-issuer(s) other th	nan the issuer named above.						
Full legal name(s) of co-issuer(s)	(if applicabl	e)						
ITEM 4 - UNDERWRITER INFORMATION								
If an underwriter is completing the report, provide the underwriter's full le	egal name and firm 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 in your reasonable judgment most closely corresponds to the issuer's primary business activity.				
NAICS industry code 2 1 2 2 3 3				
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 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				
c) SEDAR profile number				
Does the issuer have a SEDAR profile?				
No  ✓ Yes If yes, provide SEDAR profile number 0 0 0 3 9 8 7 6				
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 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.				
AII AB BC MB NB NL NT				
□ NS         □ NU         □ ON         □ PE         □ QC         □ SK         □ YT				
g) Public listing status				
If the issuer has a CUSIP number, provide below (first 6 digits only)  CUSIP number				
If the issuer is publicly listed, provide the name of the exchange on which the issuer's equity securities primarily trade. Provide only the name of an				
exchange and not a trading facility such as, for example, an automated trading system.				
Exchange name				
h) Size of issuer's assets				

Select the size of the issuer's assets based on its most recently available annual financial statements (Canadian \$). If the issuer has not prepared annual financial statements for its first financial year, provide the size of the issuer's assets at the distribution end date.

☐ \$0 to under \$5M	☐ \$5M to under \$25M	☐ \$25M to under \$100M
\$100M to under \$500M	☐ \$500M to under \$1B	\$1B or over

ITEM 6 - INVESTMENT FUND ISSUER INFORMATION						
If the issuer is an inves	tment fund, provide the following information.					
a) Investment fund manager information						
Full legal name						
Firm NRD number	(if applicable)					
If the investment fund mand	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 tha	nt most accurately identifies the issuer (select only one) .					
Money market	☐ Equity ☐ Fixed income ☐ Balanced					
Alternative strateg	gies Cryptoasset Other (describe)					
Indicate whether one or bot	h of the following apply to the investment fund .					
Invests primarily in	n other investment fund issuers					
☐ Is a UCITs Fund¹						
<sup>1</sup> Undertaking for the Collec (EU) directives that allow c	tive Investment of Transferable Securities funds (UCITs Funds) are investment funds regulated by the European Union collective investment schemes to operate throughout the EU on a passport basis on authorization from one member state.					
c) Date of formation a	and financial year-end of the investment fund					
Date of forma	tion Financial year-end MM DD MM DD					
d) Reporting issuer st	atus of the investment fund					
Is the investment fund a rep	orting issuer in any jurisdication of Canada? No Yes					
If yes, select the jurisdictions	s of Canada in which the investment fund is a reporting issuer.					
☐ AII ☐	AB BC MB NB NL NT					
□ NS □	NU ON PE QC SK YT					
e) Public listing status of the investment fund						
If the investment fund has a CUSIP number, provide below (first 6 digits only)						
CUSIP number						
If the investment fund is publicly listed, provide the name of the exchange on which the investment fund's securities primarily trade. Provide only the						
name of an exchange and not a trading facility such as, for example, an automated trading system.  Exchange name						
f) Net asset value (NAV) of the investment fund						
Select the NAV range of the investment fund as of the date of the most recent NAV calculation (Canadian \$).						
\$0 to under \$5M	\$5M to under \$25M \$25M to under \$100M					
\$100M to under \$500	DM \$500M to under \$1B \$1B or over Date of NAV calculation:  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 in connection with the distribution, which must 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 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) 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	2022	12	23
	YYYY	MM	DD

End date	2022	12	23
	YYYY	MM	DD

# c) Detailed purchaser information

Complete Schedule 1 of this form for each purchaser and attach the schedule to the completed report.

#### d) Types of securities distributed

Provide the following information for all distributions reported on a per security basis. Refer to Part A(12) of the Instructions for how to indicate the security code. If providing the CUSIP number, indicate the full 9-digit CUSIP number assigned to the security being distributed.

						Canadian \$		
Security CUSIP number (if applicable)		CUSIP number (if applicable)	Description of security Number of securities		Single or lowest price	Highest price	Total amount	
С	М	S	37254G	common shares	2,511,951.00	0.0820	0.1000	249,000.00
F	Т	S	37254G	flow-through shares	800,000.00	0.1000	0.1000	80,000.00

# e) Details of rights and convertible/exchangeable securities

If any rights (e.g. warrants, options) were distributed, provide the exercise price and expiry date for each right. If any convertible/exchangeable securities were distributed, provide the conversion ratio and describe any other terms for each convertible/exchangeable security.

Convertible / exchangeable security code Security code			ise price adian \$)	Expiry date (YYYY- MM-DD)	Conversion ratio	Describe other items (if applicable)		
				Lowest	Highest			

# f) Summary of the distribution by jurisdiction and exemption

State the total dollar amount of securities distributed and the number of purchasers for each jurisdiction of Canada and foreign jurisdiction where a purchaser resides and for each exemption relied on in Canada for that distribution. However, if an issuer located outside of Canada completes a distribution in a jurisdiction of Canada, include distributions to purchasers resident in that jurisdiction of Canada only.

This table requires a separate line item for: (i) each jurisdiction where a purchaser resides, (ii) each exemption relied on in the jurisdiction where a purchaser resides, if a purchaser resides in a jurisdiction of Canada, and (iii) each exemption relied on in Canada, if a purchaser resides in a foreign jurisdiction.

For jurisdictions within Canada, state the province or territory, otherwise state the country.

Province or country	Exemption relied on	Number of unique <sup>28</sup> purchasers	Total amount (Canadian \$)
United States	NI 45-106 2.3 [Accredited investor]	1	175,000.00
British Columbia	NI 45-106 2.3 [Accredited investor]	5	80,000.00
British Columbia	NI 45-106 2.14 [Securities for debt]	3	14,000.00
British Columbia	NI 45-106 2.13 [Petroleum, natural gas and mining properties]	1	50,000.00
Alberta	NI 45-106 2.13 [Petroleum, natural gas and mining properties]	1	10,000.00
	329,000.00		

- <sup>2a</sup> In calculating the number of unique purchasers per row, count each purchaser only once. Joint purchasers may be counted as one purchaser.
- <sup>2b</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. 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	

<sup>&</sup>lt;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	N INFORMATION							
Provide information for each person (as defined in NI 45-106) to whom the issuer directly provides, or will provide, any compensation in connection with the distribution. <b>Complete additional copies of this page if more than one person was, or will be, compensated.</b>								
Indicate whether any compensation 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	ensated and registrat	ion status						
Indicate whether the person cor	npensated is a registrant.		✓ No		Yes			
If the person compensated is an individual, provide the name of the individual.								
Full legal name of indiv	idual chin		lepp					
	Family name First given name Secondary given names							
If the person compensated is no	t an individual, provide t	he following infor	mation.					
Full legal name	of non-individual							
F	irm NRD number				(if a	pplicable)		
Indicate whether the person cor		distribution throu	gh a funding	portal or a	n internet-base	ed portal.	<b>√</b>	No  Yes
b) Business contact infor								
If a firm NRD number is not pro		de the business co	ntact inform	ation of the	person being o	compensate	d.	
Street address	6119 Ross St							
Municipality	Vancouver			ſ	Province/Stat	e British	n Columb	ia
Country	Canada			Postal	code/Zip cod	e V5W	3L7	
Email address	leppchin@outlook.cor	n		Tele	ohone numbe	er		
c) Relationship to issuer	or investment fund ma	anager						
Indicate the person's relationshi the Instructions and the meanir							"connected	" in Part B(2) of
Connect with the issu	er or investment fund ma	anager		Inside	of the issuer (	other than	an investm	ent fund)
Director or officer of the	ne investment fund or inv	estment fund ma	nager	Emplo	yee of the issu	er or invest	ment fund	manager
✓ None of the above								
d) Compensation details								
Provide details of all compensat Canadian dollars. Include cash of incidental to the distribution, sur allocation arrangements with th	commissions, securities-bach as clerical, printing, leg e directors, officers or em	ased compensatio gal or accounting	n, gifts, discou services. An is	unts or othe ssuer is not	er compensatio required to ask	n. Do not re	port paym	ents for services
Cash commissions pa	3,000.0	0			Security code 1	Security	code 2	Security code 3
Value of all securitie distributed as compensatio	~		Security code	s	C M S			
Describe t	erms of warrants, option	s or other rights						
Other compensation	n <sup>5</sup>	Describe						
Total compensation pa	id 3,000.0	0						
Check box if the person will or may receive any deferred compensation (describe the terms below)								
<sup>4</sup> Provide the aggregate value of additional securities of the issurights exercisable to acquire action of the include deferred comp	ier. Indicate the security dditional securities of the	codes for all secu						

a) Name of person com	pensated and registration status								
Indicate whether the person compensated is a registrant.    No   Yes									
If the person compensated is an individual, provide the name of the individual.									
Full legal name of indi	vidual								
	Family name	'	First g	iven name		Secondary of	jiven names		
If the person compensated is not an individual, provide the following information.									
Full legal name of non-individual Canaccord Genuity Corp./Corporation Canaccord Genuity									
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.  V No Yes									
b) Business contact info	rmation								
If a firm NRD number is not pr	ovided in Item 8 (a), provide the busi	ness contact	information o	f the person bei	ng com	pensated.			
Street address	2200 - 609 Granville Street								
Municipality	Vancouver			Province/S	State	British Colum	bia		
Country	Canada		Pos	stal code/Zip o	code	V7Y 1H2			
Email address	psmyth@cgf.com		Т	elephone nun	nber	6046631899			
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.									
	uer or investment fund manager	100 for the	·			er than an invest	ment fund)		
<u></u>	the investment fund or investment fu	ınd manager			,	or investment fun	•		
<u> </u>	the investment fund of investment it	ind manager		ripioyee or the i	SSUE! C	n investment fan	u manager		
✓ None of the above									
d) Compensation details	3								
	tion paid, or to be paid, to the person commissions, securities-based compe								
incidental to the distribution, su	uch as clerical, printing, legal or accou	unting service	s. An issuer is	not required to	ask for				
_	he directors, officers or employees of	a non-individ	ual compens	ated by the issue	er.				
Cash commissions p	aid 3,000.00			Security co	de 1	Security code 2	Security code 3		
Value of all securiti distributed as compensation		Securit	y codes						
Describe	terms of warrants, options or other r	ights							
Other compensation <sup>5</sup> Describe									
Total compensation paid									
Check box if the person will or may receive any deferred compensation (describe the terms below)									
<sup>4</sup> Provide the aggregate value	of all securities distributed as compe	ensation, <u>exc</u>	luding option	s, warrants or o	ther rig	hts exercisable t	o acquire		
additional securities of the iss	uer. Indicate the security codes for a additional securities of the issuer.								
טט ווטנ וווטומעפ מפופוזפט COM	บธกรสแบก.								

a) Name of person compensated and reg	istration status								
Indicate whether the person compensated is a registrant.    No   Yes									
If the person compensated is an individual, provide the name of the individual.									
Full legal name of individual									
	Family name	Firs	t given name	Secondary given names					
If the person compensated is not an individual, provide the following information.									
Full legal name of non-individua	PI Financial Corp.	/Corporation Fir	nancière PI						
Firm NRD numbe	Firm NRD number 5 2 9 0 (if applicable)								
Indicate whether the person compensated facilitated the distribution through a funding portal or an internet-based portal.  V No Yes									
b) Business contact information									
If a firm NRD number is not provided in Item 8 (a,	, provide the business co	ntact information	of the person being co	mpensated.					
Street address 2400-733 Seym	our St								
Municipality Vancouver			Province/State	British Columbia					
Country Canada		F	ostal code/Zip code	V6B 0S6					
Email address   jlocke@pifinanc	ial.com		Telephone number	6046642670					
c) Relationship to issuer or investment fu	nd 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 se		· · · <u>—</u>							
Connect with the issuer or investment f	und manager		Insider of the issuer (o	ther than an investment fund)					
Director or officer of the investment fun	d or investment fund ma	nager	Employee of the issue	r or investment fund manager					
✓ None of the above									
d) Compensation details									
Provide details of all compensation paid, or to be p									
Canadian dollars. Include cash commissions, secur incidental to the distribution, such as clerical, print									
allocation arrangements with the directors, officers	or employees of a non-	individual compe	nsated by the issuer.						
Cash commissions paid 1	000.00		Security code 1	Security code 2 Security code 3					
Value of all securities		Security codes							
distributed as compensation <sup>4</sup>	ontions or other rights								
Describe terms of warrants, options or other rights									
Other compensation <sup>5</sup>	Describe								
Total compensation paid									
Check box if the person will or may receive any deferred compensation (describe the terms below)									
<sup>4</sup> Provide the aggregate value of all securities dis	tributed as compensation	on, <u>exclu</u> ding opti	ons, warrants or other i	rights exercisable to acquire					
additional securities of the issuer. Indicate the se rights exercisable to acquire additional securities	curity codes for all secu								
<sup>5</sup> Do not include deferred compensation.									

тем 9 - Directors, Execu	TIVE OFFICERS	AND PROMOT	ERS OF THE ISS	SUER						
If the issuer is an investment fund	d, do not complete l	Item 9. Procced to	Item 10.							
Indicate whether the issuer is any o	f the following (select	t the one that appli	es - if more than one	applies, select onl	y one).					
✓ Reporting issuer in any jurisdiction of Canada										
Foreign public issuer										
Wholly owned subsidiary of	a reporting issuer in	any jurisdiction of	Canada <sup>6</sup>							
Provide name of reporting issuer										
Wholly owned subsidiary of	a foreign public issu	uer <sup>6</sup>						_		
Provide name of	foreign public issue	r						7		
Issuer distributing only eligil	ble foreign securities	and the distribution	n is to permitted clie	ents only <sup>7</sup>				_		
If the issuer is at least one of the	above, do not comp	olete Item 9(a) – (d	c). Proceed to Item	10.						
<sup>6</sup> An issuer is a wholly owned subside securities that are required by law to respectively. <sup>7</sup> Check this box if it applies to the collients. Refer to the definitions of "e.	o be owned by its dir urrent distribution evo	rectors, are benefic en if the issuer mad	ially owned by the re de previous distribut	eporting issuer or ti tions of other types	the foreign	public is	ssuer,			
If the issuer is none of the	above, check this b	oox and complete	Item 9(a) - (c).							
a) Directors, executive officer	s and promoters of	of the issuer								
Provide the following information for	•		moter of the issuer T	or locations within	Canada s	tate the	nrovince	or		
territory; otherwise state the country.							province			
Organization or company name	Organization or company name  Family name  First given name  Secondary given names  Secondary given names  Business location of non-individual or residentail jurisdiction of individual  Relationship to issuer (select all that apply)									
				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			to promo			
				Province or country	D		C	)		
c) Residential address of each individual										
Complete Schedule 2 of this form completed report. Schedule 2 also					(a) and (b)	and at	tach to t	he		

# **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	geologica resource corp.							
Full legal name	Unwin							
	Family name First given name			Secondary given names			ames	
Title	CEO & President							
Telephone number	6047625355	Email address doug			ıg.unwin@geologicaresource.co			
Signature	D Unwin	Date	202	3	01	03		
			YYY	Y	MM	DD		

TEM 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 individua	al certifying the report							
Full legal name				Title				
•	Family name	First given name	Secondary given names					
Name of company								
Telephone number		Er	nail 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.

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.