Form 45-106F1 Report of Exempt Distribution (Non-investment fund issuer)

ITEM 1 – REPORT TYPE
✓ New report
Amended report If amended, provide Submission ID of report that is being amended: (Example: EDR1234567890-123)
ITEM 2 – PARTY CERTIFYING THE REPORT
Indicate the party certifying the report (select only one). For guidance regarding whether an issuer is an investment fund, refer to section 1.1 of National Instrument 81-106 Investment Fund Continuous Disclosure and the companion policy to NI 81-106.
ITEM 3 – ISSUER NAME AND OTHER IDENTIFIERS
Provide the following information about the issuer, or if the issuer is an investment fund, about the fund. Full legal name Solvbl Solutions Inc.
Previous full legal name If the issuer's name changed in the last 12 months, provide most recent previous legal name.
Website (if applicable)
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
Did two or more co-issuers distribute a single security? ☑No □Yes
If two or more issuers distributed a single security, provide the full legal name(s) of the co-issuer(s) other than the issuer named above. Full legal name(s) of co-issuer(s)

ITEM 4 – UNDERWRITER INFORMATION

If an underwriter is completing the report, p	provide the underw	vriter's full leg	al name and firm NRD number.			
Full legal name						
Does the Underwriter's Firm have an NRD Number? Firm NRD number						
If the underwriter does not have a firm NRD number, provide the head office contact information of the underwriter.						
Street address	Municipality		Province/State	Postal/ZIP code		
Country	Telephone numb	ber	Website (if applicable)			

ITEM 5 – ISSUER INFORMATION						
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	NAICS industry code					
518210 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 a						
b) Number of employees						
√ 0 - 49 50 - 99 100 - 499 500	or more					
c) SEDAR profile number						
Does the issuer have a <u>SEDAR</u> profile ? ☐ No	If yes, provide SEDAR profile 00043218	screenshot of th	EDAR profile is a "private" profile, please provide a e issuer's profile by e-mail to ings@osc.gov.on.ca			
d) Head office address		If the issuer does not	have a SEDAR profile, complete Item 5(d) – (h).			
Street address	Municipality	Province/State	Postal/ZIP code			
Country	Telephone number					
e) Date of formation and financial yea	r-end					
Date of formation	Financial year-end					
f) Reporting issuer status						
Is the issuer a reporting issuer in any juriso	diction of Canada?					
If yes, select the jurisdictions of Canada ir	which the issuer is a reporting	g issuer.				
g) Public listing status						
Does the issuer have a CUSIP number? CUSIP number (provide first 6 digits only)						
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:	onto Stock Exchange	TSX Venture Exchange	Canadian Securities Exchange			
Aequitas Neo Exchange Australian Securities Exchange Deutsche Boerse Euronext						
London Stock Exchange Nasdaq New York Stock Exchange Shanghai Stock Exchange						
Shenzhen Stock Exchange Stock Exchange Of Hong Kong Tokyo Stock Exchange OTHER						
If other, describe:						
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.						
	0M to under \$1B	\$1B or over				

TEM 7 – INFORMATION A					
If an issuer located outside of Can resident in that jurisdiction of Cana distribution, which must be disclos	ada only. Do not include in Ite	em 7 securities issued	l as payment of com	missions or finder's	fees in connection with the
a) Currency					
Select the currency or currencies is $\overline{\mathcal{A}}$ Canadian dollar \Box US dollar $[$		made. All dollar amou	nts provided in the re	eport must be in Can	adian dollars.
b) Distribution date(s)					
	es. If the report is being filed				
c) Detailed purchaser informat	ion				
Complete <u>Schedule 1</u> of this form	m for each purchaser and a	ttach the schedule to	o the completed rep	oort.	
Schedule 1.xls>	x - 89 KB				
d) Types of securities distribute	ed				
Provide the following information for		n a par soqurity basis	Poter to Part 1/12	of the Instructions for	by how to indicate the accur
code. If providing the CUSIP number					now to malcate the secur
				Canadian \$	
Security code	CUSIP number	Number of securities	Single or lowest price	Highest price	Total amount
CMS		115,384,615.0000	0.0650		7,500,000.0000
Description of security: e) Details of rights and convert f any rights (e.g. warrants, options	s) were distributed, provide th	e exercise price and e			
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Total dollar amount of securitie	es distributed	7,500,000.0000
Total number of unique purchasers ^{2b}	4	
	, ,	

^{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.

ITEM 7 – INFORMATION ABOUT THE DISTRIBUTION

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.

✓ Not Applicable

Description	document or other material	filed with or delivered to regulator?	Previously filed Submission ID	Filename
		Y N		
		•	other material delivered to regulator?	other material delivered to regulator?

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. Complete additional copies of this page if more than one person was, or will be, compensated.

Indicate whether any compensation was paid, or will be paid, in connection with the distribution. \boxed{V} No \boxed{V} Yes

PERSON 1

a) Name of person compensated and registration status								
Indicate whether the person compensated is a registrant.								
If the person compensated is an individu	al. provide the full legal name o	f the individual.						
Family name	If the person compensated is an individual, provide the full legal name of the individual. Family name First given name Secondary given names							
If the person compensated is not on ind	ividual provide the following info	rmation						
If the person compensated is not an indi	vidual, provide the following into		applicable)					
Full legal name of non-individual Firm NRD number (if applicable)								
Indicate whether the person compensate	ed facilitated the distribution thro	ugh a funding portal or an internet-bas	ed portal.					
b) Business contact information								
If a firm NRD number is not provided in	Item 8(a), provide the business	contact information of the person bein	a compensated.					
Street address	Municipality		Postal/ZIP code					
Country	Tolophono numbor	Email address						
Country	Telephone number							
c) Relationship to issuer or investme	ent 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.								
Insider of the issuer (other than an in-	vestment fund)	None of the above						
Director or officer of the investment fu	ind of investment lund manager							
d) Compensation details								
Provide details of all compensation paid, or to be paid, to the person identified in Item 8(a) in connection with the distribution. Provide all amounts in Canadian dollars. Include cash commissions, securities-based compensation, gifts, discounts or other compensation. Do not report payments for services incidental to the distribution, such as clerical, printing, legal or accounting services. An issuer is not required to ask for details about, or report on, internal allocation arrangements with the directors, officers or employees of a non-individual compensated by the issuer.								
Cash commissions paid								
Value of all securities	Security code1	Security code2	Security code3					
distributed as			Security codes					
compensation ⁴	Describe terms of V	warrants, options or other rights						
Other compensation ⁵	Describe							
Total compensation Paid	0.0000							
Check box if the person will or may	receive any deferred compensation	on (describe the terms below)						

⁴ Provide the aggregate value of all securities distributed as compensation, excluding options, warrants or other rights exercisable to acquire additional securities of the issuer. Indicate the security codes for all securities distributed as compensation, including options, warrants or other rights exercisable to acquire additional securities of the issuer.

⁵ Do not include deferred compensation.

ITEM 9 – D	IRECTORS, EXECUTIVE OFFICERS	S AND PROMOTERS OF T	THE ISSUER					
Indicate whet	her the issuer is any of the following (select the	one that applies - if more than one	e applies, select only one).					
✓ Reporting	issuer in any jurisdiction of Canada							
🗌 Foreign p	Foreign public issuer							
Wholly ow	ned subsidiary of a reporting issuer in any juris	diction of Canada ⁶						
	ame of reporting issuer							
Wholly ow	med subsidiary of a foreign public issuer ⁶							
Provide na	ame of foreign public issuer							
Issuer dis	tributing only eligible foreign securities and the	distribution is to permitted clients	only ⁷					
-	er is at least one of the above, do not com							
	r is a wholly owned subsidiary of a reporting iss that are required by law to be owned by its dire							
	his box if it applies to the current distribution ev							
	efer to the definitions of "eligible foreign securit	-		,				
If the issue	uer is none of the above, check this box an	d complete Item 9(a) – (c).						
a) Directors	, executive officers and promoters of the iss	suer						
Drovida tha fa	Howing information for each director evenuities	officer and promotor of the issuer	For locations within Consider state 4					
	Ilowing information for each director, executive wise state the country. For "Relationship to iss			le province of				
		Family name	Business leastion of	Relationship to				
Individual?	Organization or company name	Family name First given name	Business location of non-individual or residential	issuer				
		Secondary given name	jurisdiction of individual	(select all that apply)				
			_					
b) Promoter	information							
If the promote	r listed above is not an individual, provide the f	ollowing information for each direc	tor and executive officer of the prom	oter. For locations				
	a, state the province or territory, otherwise state							
		Family name		Relationship to				
	Organization or company name	First given name	Residential jurisdiction of individual	promoter (select one or both				
		Secondary given name		if applicable)				
L								
			=					
		L	<u>–1</u>	<u> </u>				
c) Residenti	al address of each individual							
	<u>hedule 2</u> of this form providing the full resid							
attach to the	completed report. Schedule 2 also requires	information to be provided about	ut control persons.					

ITEM 10 – CERTIFICATION

Provide the following certification and business contact information of an officer, director or agent of the issuer or underwriter. If the issuer or underwriter is not a company, an individual who performs functions similar to that of a director or officer may certify the report. For example, if the issuer is a trust, the report may be certified by the issuer's trustee. If the issuer is an investment fund, a director or officer of the investment fund manager (or, if the investment fund manager is not a company, an individual who performs similar functions) may certify the report if the director or officer has been authorized to do so by the investment fund.

The certification may be delegated, but only to an agent that has been authorized by an officer or director of the issuer or underwriter to prepare and certify the report on behalf of the issuer or underwriter. If the report is being certified by an agent on behalf of the issuer or underwriter, provide the applicable information for the agent in the boxes below.

If the individual completing and filing the report is different from the individual certifying the report, provide the name and contact details for the individual completing and filing the report in Item 11.

The signature on the report must be in typed form rather than handwritten form. The report may include an electronic signature provided the name of the signatory is also in typed form.

Securities legislation requires an issuer or underwriter that makes a distribution of securities under certain prospectus exemptions to file a completed report of exempt distribution.

By completing the information below, I certify, on behalf of the issuer/underwriter, 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/agent	Solvbl Solutions Inc.		
Full legal name - Family name	First given n	ame	Secondary given names
Akbar	Kaiser		
Title		Telephone number	Email address
CEO		416-450-5995	kaiser.akbar@solvbl.com
Signature "Kaiser Akbar"		Date 2022-11-04	

ITEM 11 – CONTACT PERSON

Provide the following business contact information for the individual that the securities regulatory authority or regulator may contact with any questions regarding the contents of this report, if different than the individual certifying the report in Item 10.

Same as individual certifying the report

Full legal name - Family name	First given name	Secondary given names	Title
Moretti	Enrico		Solicitor
Name of company		Telephone number	Email address
Boyle & Co. LLP		416-867-8800	enrico@boyleco.com

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 regulatory authority or regulator.

By signing this report, the issuer/underwriter confirms that each individual listed in Schedule 1 or 2 of the report who is resident in a jurisdiction of Canada:

a) has been notified by the issuer/underwriter of the delivery to the securities regulatory authority or regulator of the information pertaining to the individual as set out in Schedule 1 or 2, that this information is being collected by the securities regulatory authority or regulator under the authority granted in securities legislation, that this information is being collected for the purposes of the administration and enforcement of the securities legislation of the local jurisdiction, and of the title, business address and business telephone number of the public official in the local jurisdiction, as set out in this form, who can answer questions about the security regulatory authority's or regulator's indirect collection of the information, and

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

Submission ID

Date