Form 45-106F1 Report of Exempt Distribution

ITEM 1 - REPORT TYPE											
New report											
Amended report If amended, provide filing date of report that is being amended 2020 12 24 (YYYY-MM-DD)											
ITEM 2 - PARTY CERTIFYING THE REPORT											
Indicate the party certifying the report (select only one). For guidance regarding whether an issuer is an investment fund, refer to section 1.1 of National Instrument 81-106 Investment Fund Continuous Disclosure and the companion policy to NI 81-106.											
Instrument 81-106 Investment Fund Continuous Disclosure and the companion policy to NI 81-106.											
 ✓ Issuer (other than an investment fund) 											
Item 3 - Issuer Name and Other Identifiers											
Provide the following information about	the issuer, or if the issuer is an in	vestment fund, about the fund.									
Full legal name	Crystal Bridge Enterpri	ses Inc.									
Previous full legal name	9										
If the issuer's name changed in t	he last 12 months, provide most	recent previous legal name.									
Website	Website (if applicable)										
If the issuer has a legal entity identifier, p	rovide below. Refer to Part B of t	the Instructions for the definition	of "legal entity identifier".								
Legal entity identifier											
If two or more issuers distributed a single	security, provide the full legal no	ame(s) of the co-issuer(s) other th	han the issuer named above.								
Full legal name(s) of co-issuer(s)	(if applicab	le)								
ITEM 4 - UNDERWRITER INFOR	MATION										
If an underwriter is completing the report	, provide the underwriter's full le	gal name and firm NRD number	:								
Full legal name											
Firm NRD number		(if applicable)									
If the underwriter does not have a firm N	RD number, provide the head off	fice contact information of the ur	nderwriter.								
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 5 2 3 9 9 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.
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 4 5 4 4 7
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.
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
S100M to under \$500M	S500M to under \$1B	S1B or over

ib close is an investment fund, provide the following information: iiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiii
Full legal name
Firm 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 Country Postal code/Zjp code Telephone number Website (if applicable) D Type of investment fund Type of investment fund fund that most accurately identifies the issuer (select only one). Money market Country Postal code/Zjp code Indicate whether one or both of the following apply to the investment fund. Invests primarily in other investment fund issuers Country Indicate whether one or both of the following apply to the investment fund. Invests primarily in other investment fund issuers Indicate whether one or both of the following apply to the investment fund. Invests primarily in other investment of Transferable Securities funds (UCITs Funds) are investment funds regulated by the European Union (EU) directives that allow collective investment fund Date of formation and financial year-end of the investment fund YYYY MM DD MM DD
Street address Municipality Province/State Country Postal code/Zip code Telephone number Website (if applicable) b Type of investment fund b Type of investment fund b Type 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. Invests primarily in other investment fund issuers Is a UCITs Fund b Type of formation and financial year-end of the investment funds is on authorization from one member state. c Date of formation and financial year-end of the investment fund is a reporting issuer. c All All All All All All All All All Al
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If the investment fund has a CUSIP number, provide below (first 6 digits only) CUSIP number
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 \$500M \$500M to under \$1B \$1B or over Date of NAV calculation:

ITEM 7 - INFORMATION ABOUT THE DISTRIBUTION

connection Schedule 1 c	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) Curre	a) Currency										
Select the cu	urrency o	r curre	ncies	in which the dist	ribution was made. All	dollar amounts provi	ded in the report	must be in Canadi	an dollars.		
🖌 Canadi	ian dolla	ar		US dollar	Euro	Other (describ	be)				
b) Distri											
State the dis as both the	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 2020 12 18 End date 2020 12 18										
			. ,	YYYY 	MM DD		YYYY	MM DD			
-	-			rmation							
Complete	Schedu	ile 1 d	of thi	s form for eac	ch purchaser and a	ttach the schedule	e to the compl	eted report.			
d) Type	s of sec	uritie	s dist	ributed							
					ions reported on a per icate the full 9-digit CL				ow to indicate the		
								Canadian \$	3		
Security code	Security CUSIP number Description of security Number of Single or Lowest Highest price Total amount										
SUB						588,375.0	0 1.600	0	941,400.00		
e) Detai											
	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 Underlying security code Exercise price (Canadian \$) Expiry date (YYYY- MM-DD) Conversion ratio Describe other items (if applicable)									exchangeable securities		
exchangeab	e/ ble U	o <i>vide t</i> nderlyir	he con	nversion ratio and Exerci	d describe any other te ise price	Expiry date	ble/exchangeable	e security.	-		
exchangeab security cod	e/ ble U	o <i>vide t</i> nderlyir	he con	nversion ratio and Exerci (Cana	d describe any other te ise price adian \$)	Expiry date	Conversion ratio	Automatic con of the Resultin completion of p arrangement w Cognition Inc. consists of one warrant. Each exercisable int	items (if applicable) version into units g Issuer upon plan of vith Alpha Each unit e share and half		
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exchangeab security coordination S U f) Summ State the toor purchaser re distribution This table re purchaser re jurisdiction.	BU nary of f tal dollar esides an in a juris equires a esides, if	B B b b b b b b b b b b b b b b b b b b	s S S S S S S S S S S S S S S S S S S S	tion by jurisdic securities distribut comption relied of anada, include di e item for: (i) eac resides in a jurisd	d describe any other te ise price adian \$) Highest	f purchasers for each jurchaser resident in that jur purchaser resides, (ii) (iii) each exemption in	Conversion ratio	Describe other i Describe other i Automatic com of the Resultin completion of p arrangement w Cognition Inc. consists of one warrant. Each exercisable int the Resulting I for 2 years.	items (if applicable) version into units g Issuer upon plan of vith Alpha Each unit e share and half warrant to one share of ssuer at \$2.10 urisdiction where a da completes a		
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Ontario	NI 45-106 2.3 [Accredited investor]	3	32,000.00
	Total dollar amount of se	curities distributed	941,400.00
	Total number of unique purchasers ^{2b}	36	

^{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)

ITEM 8 - COMPENSATION	INFORMATION										
Provide information for each person the distribution. Complete additi						-	-	-	on in co	onnectio	on with
Indicate whether any compensate	ion was paid, or will be p	oaid, in connecti	on with the di	stribution.							
🗌 No 🗹 Yes	If yes, indicate nu	mber of perso	ons compens	ated.		3					
a) Name of person compen	sated and registratio	n status									
Indicate whether the person comp	ensated is a registrant.		No No	\checkmark	Yes						
If the person compensated is an in	dividual, provide the nai	me of the indivi	dual.								
Full legal name of individu	lal										
	Family	name		First given n	name			Seconda	ry given	names	
If the person compensated is not a	n individual, provide the	following infor	mation.								
Full legal name of	non-individual Rayr	nond James I	_td.								
Firm	NRD number 8	2 4	0			(if ap	oplica	ble)			
Indicate whether the person comp	ensated facilitated the d	istribution throu	ıgh a funding į	oortal or an	l n intern	 net-base	d port	tal.	✓ N	lo 🗌] Yes
b) Business contact informa	ation										
If a firm NRD number is not provid	led in Item 8 (a), provide	the business co	ontact informa	tion of the p	person	being c	ompe	nsated.			
Street address											
Municipality				Р	Provinc	ce/State	ə				
Country				Postal c	code/Z	ip code	e [
Email address				Telep	hone	numbe	er				
c) Relationship to issuer or	investment fund mar	nager									
Indicate the person's relationship w the Instructions and the meaning o								ng of "conne	ected" i	n Part B	1(2) of
Connect with the issuer	or investment fund man	ager		Insider	of the	issuer (other	than an inv	estmer	nt fund)	
Director or officer of the	investment fund or inve	stment fund ma	anager	Employ	/ee of t	he issue	ər or i	nvestment f	und m	anager	
✓ None of the above											
d) Compensation details											
Provide details of all compensation Canadian dollars. Include cash con incidental to the distribution, such allocation arrangements with the c	nmissions, securities-base as clerical, printing, lega	ed compensatio l or accounting	n, gifts, discou services. An is:	nts or other suer is not r	r comp require	ensatior d to ask	n. Do l	not report p	aymen	ts for se	rvices
Cash commissions paid	44,414.00]			Securit	y code 1	S	ecurity code 2	2 Se	curity co	de 3
Value of all securities distributed as compensation ⁴]	Security codes								
Describe terr	ns of warrants, options	or other rights									
Other compensation ⁵		Describe									
Total compensation paid	44,414.00]									
Check box if the perso	on will or may receive ar	ny deferred con	pensation (de	scribe the	terms	below)					
Broker will receive c	ash commission upor	n closing of th	e Issuer's Q	ualifying 1	Transa	action.					
⁴ Provide the aggregate value of a additional securities of the issuer rights exercisable to acquire addi	Indicate the security co	des for all secu)r

⁵Do not include deferred compensation.

a) Name of person comp	ensated and regis	tration status							
Indicate whether the person cor	mpensated is a regist	rant.	🗌 No	\checkmark	Yes				
If the person compensated is an	individual, provide t	he name of the indiv	vidual.						
Full legal name of indiv	ridual								
		Family name	I	First given na	ame	Secor	ndary given name	;	
If the person compensated is not an individual, provide the following information.									
Full legal name of non-individual Haywood Securities Inc.									
Firm NRD number 1 6 3 0 (if applicable)									
Indicate whether the person cor	mpensated facilitatea	the distribution thro	ough a funding i	portal or an	internet-based	l portal.	✓ No [Yes	
b) Business contact infor	mation								
If a firm NRD number is not pro	ovided in Item 8 (a), p	provide the business	contact informa	tion of the p	person being co	mpensated.			
Street address									
Municipality			7	Р	rovince/State				
Country			Ī	Postal c	ode/Zip code				
Email address			Ī	Telep	hone numbei	,			
c) Relationship to issuer	or investment fund	d manager	_						
Indicate the person's relationsh							nnected" in Part	B(2) of	
the Instructions and the meaning	-		for the purpose		-			、 、	
Connect with the issu	er or investment fun	d manager	L		of the issuer (o	ther than an i	nvestment fund)	
Director or officer of t	he investment fund o	or investment fund n	nanager	Employ	ee of the issue	r or investme	nt fund manage	r	
✓ None of the above									
d) Compensation details									
Provide details of all compensat									
Canadian dollars. Include cash c incidental to the distribution, su									
allocation arrangements with th	[ı-individual com	npensated b	y the issuer.				
Cash commissions pa	id 9,5 ⁻	17.00			Security code 1	Security co	de 2 Security of	ode 3	
Value of all securitie distributed as compensatio			Security codes	6					
	erms of warrants, op	 tions or other rights							
Other compensatio	n ⁵	Describe							
Total compensation pa		17.00							
Check box if the pe	rson will or may rece	eive any deferred co	mpensation (de	escribe the	terms below)				
Broker will receive	e cash commission	upon closing of t	he Issuer's Q	ualifving T	ransaction				
]	
⁴ Provide the aggregate value of additional securities of the issu- rights exercisable to acquire an ⁵ Do not include deferred comp	ier. Indicate the secu dditional securities o	irity codes for all see						er	

a) Name of person compe	ensated and registra	tion status									
Indicate whether the person com	pensated is a registran	t.	No No	\checkmark	Yes						
If the person compensated is an i	individual, provide the	name of the indivi	dual.								
Full legal name of individ	lual										
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 Echelon Wealth Partners Inc.											
Firm NRD number32420(if applicable)											
Indicate whether the person com	pensated facilitated th	e distribution throu	igh a funding port	tal or an	internet	t-based p	ortal.	\checkmark] No	□ `	Yes
b) Business contact inform	nation										
If a firm NRD number is not prov	ided in Item 8 (a), prov	vide the business co	ontact information	n of the p	person b	eing com	pensated.				
Street address											
Municipality				Р	rovince	/State					
Country			F	ostal c	ode/Zip	o code					\exists
Email address				Telep	hone n	umber					\exists
c) Relationship to issuer o	r investment fund n	nanager	1								
Indicate the person's relationship the Instructions and the meaning							ning of "co	onnecte	ed″ in F	Part B(2)) of
Connect with the issue	r or investment fund n	nanager		Insider	of the is:	suer (oth	er than an	invest	ment f	und)	
Director or officer of the	e investment fund or i	nvestment fund ma	anager	Employ	ee of the	e issuer o	or investme	ent fun	d man	ager	
✓ None of the above											
d) Compensation details											
Provide details of all compensation Canadian dollars. Include cash co incidental to the distribution, such allocation arrangements with the	mmissions, securities- n as clerical, printing, la directors, officers or el	based compensatio egal or accounting mployees of a non-	n, gifts, discounts services. An issuer	or other r is not r	· comper equired	nsation. E to ask fo	Do not repo	ort payr	nents	for servi	ices
Cash commissions paid	9,517.	00			Security	code 1	Security co	ode 2	Secu	rity code	3
Value of all securities distributed as compensation			Security codes								
·	rms of warrants, optio	ns or other rights									
Other compensation ⁵	5	Describe									
Total compensation paid	d 9,517.	00									
Check box if the pers	son will or may receive	e any deferred con	pensation (descr	ribe the	terms be	elow)					
Broker will receive	cash commission u	pon closing of th	e Issuer's Qual	lifying T	ransac	ction.					
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 security ditional securities of th	codes for all secu									

ITEM 9 - DIRECTORS, EXECU	TIVE OFFICERS	AND PROMOT	ERS OF THE ISS	SUER							
If the issuer is an investment fund	l, 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 jurisdiction of Canada											
Foreign public issuer											
Wholly owned subsidiary of a reporting issuer in any jurisdiction of Canada ⁶											
Provide name of reporting issuer											
Wholly owned subsidiary of a foreign public issuer ⁶											
Provide name of	foreign public issue	er]			
Issuer distributing only eligi	ble foreign securitie	s and the distributio	n is to permitted clie	ents only ⁷							
If the issuer is at least one of the	above, do not com	plete Item 9(a) – (d	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 territory; otherwise state the country.						tate the	province	or			
Organization or company name	Secondary given Business location of non-individual or residential iurisdiction of (select all that iurisdiction of control iurisdictiurisdiction of control iurisdiction of control iurisdictio										
				Province or	country	D	0	Р			
b) Promoter information											
If the promoter listed above is not an within Canada, state the province or											
Organization or company name	Organization or company name Family name First given name Secondary given names Residential jurisdiction of individual Relationship to promoter (select one or both if applicab)										
				Province or country	D		С)			
c) Residential address of eac	h individual										

Complete Schedule 2 of this form providing the full residential address for each individual listed in Item 9(a) and (b) and attach to the completed report. Schedule 2 also requires information to be provided about control persons.

ITEM 10 - CERTIFICATION

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

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

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

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

Securities legislation requires an issuer or underwriter that makes a distribution of securities under certain prospectus exemptions to file a completed report of 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	Crystal Bridge Enterprises Inc.								
Full legal name	Bakshi	Rajeev (Rob)							
	Family name	First given name		Secondary given names					
Title	Chief Executive Officer								
Telephone number	6047612100	Email address	robbakshi@gmail.com						
Signature	Rajeev (Rob) Bakshi	Date	2021	01	08				
			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	Krentz	Leigh			Title	Paralegal
	Family name	First given name	Secondary	given names		
Name of company	Morton Law LLP					
Telephone number	6043319540	Em	ail address	lak@mortonl	aw.ca	

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.