# 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.

(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 (in Québec, Regulation 81-106 respecting Investment Fund Continuous Disclosure and Policy Statement to Regulation 81-106 respecting Investment Fund Continuous Disclosure and Policy Statement to Regulation 81-106 respecting Investment Fund Continuous Disclosure and Policy Statement to Regulation 81-106 respecting Investment Fund Continuous Disclosure and Policy Statement to Regulation 81-106 respecting Investment Fund Continuous Disclosure and Policy Statement to Regulation 81-106 respecting Investment Fund Continuous Disclosure and Policy Statement to Regulation 81-106 respecting Investment Fund Continuous Disclosure and Policy Statement to Regulation 81-106 respecting Investment Fund Continuous Disclosure and Policy Statement to Regulation 81-106 respecting Investment Fund Continuous Disclosure and Policy Statement Fund Continuous Disclosure).

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 investment fund, about the fund.

| Full legal name                                       | BioVaxys Technology Corp. (formerly<br>BioVaxys Technology Corp. (formerly |  |
|---|--|--|
| Previous full legal name                              | BIOVAXYS TECHNOLOGY CORP. (FOR<br>CORP.)                                   | MERLY LIONS BAY MINING                                   |
| 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, p        | rovide below. Refer to Part B of the Instr                                 | uctions for the definition of "legal entity identifier". |
| Legal entity identifier                               |  |  |
| lf two or more issuers distributed a single<br>above. | e security, provide the full legal name(s) o                               | of the co-issuer(s) other than the issuer named          |
| Full legal name(s) of co-issuer(s)                    |  | (if applicable)  |

| ITEM 4 - UNDERWRITER                | INFORMATION   |                        |
|-------------------------------------|---|------------------------|
| If an underwriter is completing the | e report, provide the underwriter's full legal name, firm NRD number, and S | SEDAR+ profile number. |
| Full legal name                     |   |                        |
| Firm NRD number                     | (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<br>most closely corresponds to the issuer's primary business activity.  |
| NAICS industry code 541710   |
| 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<br>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   |
| b) Number of employees   |
| Number of employees: 🗹 0 - 49 🗌 50 - 99 🗌 100 - 499 🔲 500 or more  |
| c) SEDAR+ profile number   |
| Provide the issuer's SEDAR+ profile number   |

# ITEM 6 - INVESTMENT FUND ISSUER INFORMATION

| If the issuer is an investment fund, provi         | de the following information. |  |
|--|-------------------------------|--|
| a) Investment fund manager in                      | formation                     |  |
| Full legal name                                    |                               |  |
| Firm NRD number                                    | (if applicable)               |  |
| SEDAR+ profile number                              |                               |  |
| b) Type of investment fund                         |                               |  |
| <i>Type of investment fund that most accurated</i> |                               |  |

| Alternative strategies  | Cryptoasset  | Other (describe)   |                 |                       |                   |
|---|--|--|-----------------|-----------------------|-------------------|
| Indicate whether one or both of th  | e following apply to the i   | investment fund.   |                 |                       |                   |
| Invest primarily in other inve  |  |  |                 |                       |                   |
| ☐ Is a UCITs Fund <sup>1</sup><br><sup>1</sup> Undertaking for the Collective Investme<br>that allow collective investment schemes                              |  |  |                 |                       | ו (EU) directives |
| c) Net asset value (NAV   | ) of the investment f  | fund   |                 |                       |                   |
| Select the NAV range of the investr   | nent fund as of the date   | of the most recent NAV calc                                | ulation (Canac  | lian \$).             |                   |
| 🗌 Under \$5M  | S5M to under   | \$25M 🗌 \$25M to und                                       | er \$100M       | Date of NAV calo      | ulation:          |
| ☐ \$100M to under \$500M  | S500M to unde  | er \$1B 🗌 \$1B or over                                     |                 | YYYY MI               | M DD              |
| <b>ITEM 7 - INFORMATION</b>   | ABOUT THE DIST   | RIBUTION   |                 |                       |                   |
| <i>If an issuer located outside of Can<br/>information about purchasers res<br/>commissions or finder's fees, in co<br/>Item 7 must reconcile with the info</i> | ident in that jurisdiction on nection with the distribution with t | of Canada only. Do not incl<br>ution, which must be disclo | ude in Item 7 s | ecurities issued as p | payment of        |
| a) Currency   |  |  |                 |                       |                   |
| Select the currency or currencies in dollars.   | n which the distribution v   | vas made. All dollar amour                                 | nts provided in | the report must be    | in Canadian       |
| 🗹 Canadian dollar 🛛 US d  | dollar 🗌 Euro C  | Other (describe)   |                 |                       |                   |
| b) Distribution dates   |  |  |                 |                       |                   |
| State the distribution start and en<br>the distribution date as both the s<br>include the start and end dates fo  | tart and end dates. If the   | report is being filed for sec                              |                 |                       |                   |
| Start date 202  | 24 08 02   | End date   | 2024            | 08 02                 |                   |
| YY  | YY MM DD   |  | YYYY            | MM DD                 |                   |
| c) Detailed purchaser i   | nformation   |  |                 |                       |                   |
| Complete Schedule 1 of this for   | m for each purchaser a   | nd attach the schedule to                                  | the complete    | ed report.            |                   |
| d) Types of securities d  | istributed   |  |                 |                       |                   |
| Provide the following information<br>to indicate the security code. If pro<br>distributed.  |  |  |                 |                       |                   |

|                  |                                    |  |                         |                           | Canadian \$      |              |
|------------------|------------------------------------|--|-------------------------|---------------------------|------------------|--------------|
| Security<br>code | CUSIP<br>number (if<br>applicable) | Description of security  | Number of<br>securities | Single or<br>lowest price | Highest<br>price | Total amount |
| UBS              | 09076M101                          | Units, each consisting of one (1) c<br>ommon share and one (1) comm<br>on share purchase warrant | 4,212,340.0000          | 0.0500                    |                  | 210,617.0000 |
| CMS              | 09076M101                          | Common shares  | 800,000.0000            | 0.0500                    |                  | 40,000.0000  |

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 /<br>exchangeable | Underlying    |        | se price<br>dian \$) | Expiry date (YYYY-MM-<br>DD) | Conversion ratio | Describe other terms (if  |
|-------------------------------|---------------|--------|----------------------|------------------------------|------------------|---|
| security code                 | security code | Lowest | Highest              |                              |                  | applicable)   |
| WNT                           | CMS           | 0.1500 |                      | 2026-08-02                   | 1:1              | Common share purchase w<br>arrants, each convertable in<br>to one (1) common share at<br>an exercise price of \$0.15 u<br>ntil August 2, 2026 |

#### 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<br>purchasers <sup>2a</sup> | Total amount<br>(Canadian \$) |
|-----------------------------|---|--|-------------------------------|
| British Columbia            | NI 45-106 2.5 [Family, friends and business<br>associates]                | 1  | 12,500.0000                   |
| Ontario                     | NI 45-106 2.3 [Accredited investor]                                       | 7  | 60,000.0000                   |
| Ontario                     | NI 45-106 2.14 [Securities for debt]                                      | 1  | 40,000.0000                   |
| United States of<br>America | Distributions to purchasers outside of local<br>jurisdiction (BC, AB, NB) | 4  | 138,117.0000                  |
|                             | Total dollar amou   | nt of securities distributed                 | \$250,617.0000                |
|                             | Total number of unique purchasers <sup>2b</sup>                           | 13   |                               |

<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.*<sup>3</sup>*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>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.

## **ITEM 8 - COMPENSATION INFORMATION**

| Provide information for each<br>whom the issuer directly prov<br><b>copies of this page if more t</b> | ides, or will provide, any c                              | ompensation in c                         | connection with th            |               |                  |           |
|---|---|--|-------------------------------|---------------|------------------|-----------|
| Indicate whether any compen   | sation was paid, or will be<br>If yes, indicate num       |  |                               |               |                  |           |
| a) Name of person   | compensated and reg                                       | gistration stat                          | us                            |               |                  |           |
| Indicate whether the person c   | ompensated is a registran                                 | nt.                                      |                               |               |                  |           |
| 🗌 No 🗹 Yes  |   |  |                               |               |                  |           |
| If the person compensated is  | an individual, provide the                                | name of the indi                         | vidual.                       |               |                  |           |
| Full legal name of indivi   | dual  |  |                               |               |                  |           |
| If the person compensated is  | Family nam<br>not an individual, provide                  |  | First given name<br>Drmation. |               | Secondary give   | en names  |
| Full legal name of non-   | individual Canaccord G                                    | enuity Corp./Co                          | rporation Canaco              | cord Genui    | ty               |           |
| Firm NRI  | D number 900  |  | (if appl                      | icable)       |                  |           |
| Indicate whether the person c   | ompensated facilitated th                                 | e distribution thr                       | ough a funding p              | ortal or an l | internet-based p | portal    |
| ✓ No □ Yes  |   |  |                               |               |                  |           |
| b) Business contact   | information   |  |                               |               |                  |           |
|   |   |  |                               |               |                  |           |
| If a firm NRD number is not p   | rovided in Item 8(a), provi                               | de the business c                        | ontact informatic             | on of the pe  | rson being comp  | pensated. |
| Street address  |   |  |                               |               |                  |           |
| Municipality  |   |  | Province/State                |               |                  |           |
| Country   |   | Postal                                   | code/Zip code                 |               |                  |           |
| Email address   |   | <br>Tele                                 | phone number                  |               |                  |           |
| c) Relationship to is   | suer or investment fu                                     | und manager                              |                               |               |                  |           |
| Indicate the person's relations<br>'connected' in Part B(2) of the<br>respecting Prospectus Exempt    | ship with the issuer or inve<br>Instructions and the mear | estment fund mar<br>ning of 'control' in | section 1.4 of NI             |               |                  |           |
|   | er or investment fund m                                   | -  |                               |               |                  |           |
|   | ner than an investment f                                  |  |                               |               |                  |           |
|   | e investment fund or inve<br>or investment fund mana      |  | anager                        |               |                  |           |
| ✓ None of the above   |   | 25C1                                     |                               |               |                  |           |
|   | ataila  |  |                               |               |                  |           |
| d) Compensation de  | etalls  |  |                               |               |                  |           |

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  | \$4,800.0000     |   |                 |
|--|------------------|---|-----------------|
| Value of all securities distributed as compensation <sup>4</sup>   | \$0.0000         | \$0.0000  |                 |
| Security codes   | Security code 1  | Security code 2   | Security code 3 |
| Security codes   | WNT              |   |                 |
| Describe terms of warrants, options or other rights  |                  | share purchase w<br>one (1) common sł<br>til August 2, 2026 |                 |
| Other compensation <sup>5</sup>  |                  |   |                 |
| Describe   |                  |   |                 |
|  | [                |   | -               |
| Total compensation paid  | \$4,800.0000     |   |                 |
| Check box if the person will or may receive any def  | erred compensati | on (describe the te   | erms below)     |
|  |                  |   |                 |
| <sup>4</sup> Provide the aggregate value of all securities distributed as compensa<br>securities of the issuer. Indicate the security codes for all securities dis<br>acquire additional securities of the issuer. |                  | -   |                 |

<sup>5</sup>Do not include deferred compensation.

### ITEM 9 – DIRECTORS, EXECUTIVE OFFICERS AND PROMOTERS OF THE ISSUER

If the issuer is an investment fund, do not complete Item 9. Proceed 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).

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 issuer <sup>6</sup>

*Provide name of foreign public issuer* 

□ Issuer distributing only eligible foreign securities and the distribution is to permitted clients only <sup>7</sup>.

#### If the issuer is at least one of the above, do not complete Item 9(a) - (c). Proceed to Item 10.

<sup>6</sup> 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.

<sup>7</sup> 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.

#### □ If the issuer is none of the above, check this box and complete Item 9(a) – (c).

#### 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 | Family<br>name | First<br>given | Secondary<br>given names | Business location of non-individual<br>or residential jurisdiction of<br>individual | Relationship to issuer<br>(select all that apply) |   |   |
|------------------------------|----------------|----------------|--------------------------|---|---|---|---|
|                              |                | 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 | Family | First given | , , , | Residential jurisdiction<br>of individual | Relationship to<br>one or both | promoter (select<br>if applicable) |
|-----------------|--------|-------------|-------|---|--------------------------------|------------------------------------|
| company name    | name   | name        | names | Province or country                       | D                              | 0                                  |
|                 |        |             |       |   |                                |                                    |
|                 |        |             |       |   |                                |                                    |

c) Residential address of each 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 to that of a director of 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/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/<br>investment fund<br>manager/agent | BioVaxys Technologies Corp. |               |             |             |            |  |
|---|-----------------------------|---------------|-------------|-------------|------------|--|
| Full legal name                                     | PASSIN James                |               |             |             |            |  |
|   | Family name                 | First give    | en name     | Secondary g | iven names |  |
| Title   | Cheif Executive Officer     |               |             |             |            |  |
| Telephone number                                    | +1 (646) 452-7054           | Email address | jpassin@bio | /axys.com   |            |  |
|   |                             |               |             |             |            |  |
| Signature   | /s/ James Passin            | Date          | 2024        | 08 10       |            |  |
|   |                             |               | 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  | MILLER                           | Rod                  | Bernard               |  |  |
|------------------|----------------------------------|----------------------|-----------------------|--|--|
|                  | Family name                      | First given name     | Secondary given names |  |  |
| Title            | Director                         |                      |                       |  |  |
| Name of company  | KEYSTONE CORPORATE SERVICES INC. |                      |                       |  |  |
| Telephone number |                                  | Email address rmille | er@keystonecorp.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.

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 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.