# 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 THI	e <b>R</b> eport					
Indicate the party certifying the report (sel Instrument 81-106 Investment Fund Conti			vestment fund, refer to section	on 1.1 of National		
Investment fund issuer						
<ul> <li>✓ Issuer (other than an inves</li> </ul>	stment fund)					
Underwriter	,					
ITEM 3 - ISSUER NAME AND OT						
Provide the following information about th		vestment fund, about the fund.				
Full legal name	[					
Previous full legal name	· ·					
If the issuer's name changed in the	l last 12 months, provide most	recent previous legal name.				
Website		(if applicab	le)			
If the issuer has a legal entity identifier, pr	vide below. Refer to Part B of t					
Legal entity identifier			, , , , , ,			
If two or more issuers distributed a single s	ecurity, provide the full legal no		nan the issuer named above			
Full legal name(s) of co-issuer(s)		(if applicab	le)			
ITEM 4 - UNDERWRITER INFORM						
If an underwriter is completing the report, Full legal name	provide the underwriter's full le	gal name and firm NRD number	:	]		
Firm NRD number		(if applicable)				
			domunitor			
If the underwriter does not have a firm NR Street address	D number, provide the head off	ice contact information of the ur	lderwriter.	]		
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 3 1 2 3 1 0
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 ✓ 50 - 99 100 - 499 500 or more
c) SEDAR profile number
Does the issuer have a SEDAR profile?
No       ✓       Yes       If yes, provide SEDAR profile number       0       0       0       4       6       0       9       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.
All AB BC MB NB NL NT
NS NU ON PE QC SK YT
g) Public listing status
If the issuer has a CUSIP number, provide below (first 6 digits only)
CUSIP number
If the issuer is publicly listed, provide the name of the exchange on which the issuer's equity securities primarily trade. Provide only the name of an exchange and not a trading facility such as, for example, an automated trading system.
Exchange name
h) Size of issuer's assets
Select the size of the issuer's assets based on its most recently available annual financial statements (Canadian \$). If the issuer has not prepared annual financial statements for its first financial year, provide the size of the issuer's assets at the distribution end date.

□ \$0 to under \$5M	\$5M to under \$25M	□ \$25M to under \$100M
S100M to under \$500M	S500M to under \$1B	\$1B or over

ITEM 6 - INVESTMEN	FUND ISSUER INFORMATION
If the issuer is an inves	tment fund, provide the following information.
a) Investment fund m	anager information
Full legal name	
Firm NRD number	(if applicable)
If the investment fund man	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	t fund
Type of investment fund the	it most accurately identifies the issuer (select only one) .
Money market	Equity Fixed income Balanced
Alternative strateg	jies 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 Fund <sup>1</sup>	
	tive Investment of Transferable Securities funds (UCITs Funds) are investment funds regulated by the European Union ollective investment schemes to operate throughout the EU on a passport basis on authorization from one member state.
c) Date of formation a	nd 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	porting issuer in any jurisdication of Canada? No Yes
If yes, select the jurisdiction:	s of Canada in which the investment fund is a reporting issuer.
	AB BC MB NB NL NT
	NU ON PE QC SK YT
e) Public listing status	s of the investment fund
If the investment fund has a	CUSIP number, provide below (first 6 digits only)
	CUSIP number
	blicly listed, provide the name of the exchange on which the investment fund's securities primarily trade. Provide only the Not a trading facility such as, for example, an automated trading system.
Exchange n	
	AV) of the investment fund
	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
	DM S500M to under \$1B \$1B or over Date of NAV calculation:
	YYYY MM DD

# **ITEM 7 - INFORMATION ABOUT THE DISTRIBUTION**

purchasers resident in that jurisdi connection with the distribution, w Schedule 1 of the report.	nada completes a distribution in a juris iction of Canada only. Do not include i which must be disclosed in Item 8. The	in Item 7 securities issu	ied as payment of c	commissions or fi	nder's fees in	
a) Currency						
Select the currency or currencies i	in which the distribution was made. Al	ll dollar amounts provi	ded in the report m	ust be in Canadi	an dollars.	
Canadian dollar	US dollar 🔄 Euro	Other (describ	be)			
b) Distribution date(s)						
			ate 2021	•		
c) Detailed purchaser infor	rmation					
Complete Schedule 1 of this	s form for each purchaser and a	attach the schedule	e to the complet	ed report.		
d) Types of securities distr	ributed					
Provide the following information	n for all distributions reported on a per SIP number, indicate the full 9-digit Co				ow to indicate the	
		1		Canadian \$		
Security CUSIP number (if applicable)	Description of security	Number of securities	Single or lowest price	Highest price	Total amount	
	nmon Shares issued pursuant ebt settlement agreements.	t 58,810.0	0.8400	0.9000	51,501.00	
ΟΡΤ		50,000.0	00 1.0000		50,000.00	
e) Details of rights and cor	nvertible/exchangeable securities	· · · · · · · · · · · · · · · · · · ·				
If any rights (e.g. warrants, optior	ns) were distributed, provide the exercis aversion ratio and describe any other te	se price and expiry dat	-	-	xchangeable securities	
exchangeable Underlying security code security code	Exercise price (Canadian \$) Lowest Highest	Expiry date (YYYY- MM-DD)	Conversion ratio	Describe other items (if applicable)		
f) Summary of the distribut	tion by jurisdiction and exemption	1				
purchaser resides and for each ex distribution in a jurisdiction of Ca This table requires a separate line purchaser resides, if a purchaser r jurisdiction.	ecurities distributed and the number o cemption relied on in Canada for that o anada, include distributions to purchas e item for: (i) each jurisdiction where a resides in a jurisdiction of Canada, and state the province or territory, otherwis	distribution. However, sers resident in that jur purchaser resides, (ii) d (iii) each exemption r	if an issuer located isdiction of Canada each exemption rel	outside of Canac only. ied on in the juris	la completes a sdiction where a	
Province or country	Exemption relied of	on	Number of unique purchasers	2ª Total ar	mount (Canadian \$)	
British Columbia	NI 45-106 2.14 [Securities for	r debt]		1	31,500.00	
Alberta	NI 45-106 2.3 [Accredited inv	/estor]		1	50,000.00	
Ontario	NI 45-106 2.14 [Securities for	r debt]		1	20,001.00	
	Tota	I dollar amount of se	ecurities distribut	ed	101,501.00	
	Total number of	unique purchasers <sup>2t</sup>	D	3		
<sup>2a</sup> In calculating the number of u	nique purchasers per row, count each j	purchaser only once. J	oint purchasers ma	y be counted as o	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.

#### 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	NFORMATION					
Provide information for each person the distribution. <b>Complete addition</b>						in connection with
Indicate whether any compensation	on was paid, or will be	paid, in connecti	on with the distributior	1.		
✓ No 🗌 Yes	If yes, indicate n	umber of perso	ons compensated.			
a) Name of person compens	sated and registration	on status				
Indicate whether the person compe	nsated is a registrant.		No	Yes		
If the person compensated is an inc	lividual, provide the no	ame of the individ	lual.			
Full legal name of individu	al					
	Family	y name	First giver	n name	Secondary	given names
If the person compensated is not an	n individual, provide th	e following infor	mation.			
Full legal name of	non-individual					
Firm	NRD number			(if app	olicable)	
Indicate whether the person compe		distribution throu	gh a funding portal or	an internet-based	portal.	No 🗌 Yes
b) Business contact informa						
If a firm NRD number is not provid	ed in Item 8 (a), provic	le the business co	ontact information of th	ne person being cor	mpensated.	
Street address						
Municipality				Province/State		
Country			Posta	I code/Zip code		
Email address			Tele	ephone number		
c) Relationship to issuer or i	nvestment fund ma	nager				
Indicate the person's relationship w the Instructions and the meaning o						ed" in Part B(2) of
Connect with the issuer of	or investment fund ma	nager	Inside	er of the issuer (ot	ther than an invest	tment fund)
Director or officer of the i	nvestment fund or inv	estment fund ma	anager 🔲 Empl	loyee of the issuer	or investment fun	nd manager
None of the above						
d) Compensation details						
Provide details of all compensation Canadian dollars. Include cash com incidental to the distribution, such a allocation arrangements with the du	missions, securities-ba s clerical, printing, leg	sed compensatio al or accounting	n, gifts, discounts or oth services. An issuer is no	her compensation. ot required to ask fo	Do not report pay	ments for services
Cash commissions paid				Security code 1	Security code 2	Security code 3
Value of all securities distributed as compensation <sup>4</sup>		5	Security codes			
•	s of warrants, options	or other rights				
		Describe				
Other compensation <sup>5</sup>						
Total compensation paid						
Check box if the person	n will or may receive a	any deferred com	pensation (describe th	ne terms below)		
<sup>4</sup> Provide the aggregate value of a						
additional securities of the issuer. rights exercisable to acquire addit <sup>5</sup> Do not include deferred compens	ional securities of the		nnies distributed as CO	nnpensation, <u>inclu</u>	<u>uirig</u> options, warr	ants or other

ITEM 9 - DIRECTORS, EXECU	TIVE OFFICERS	AND PROMOT	ERS OF THE ISS	SUER				
If the issuer is an investment fund	d, do not complete l	tem 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).			
<ul><li>Reporting issuer in any juris</li></ul>	diction 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	ier <sup>6</sup>						_
Provide name of	foreign public issue	r						]
Issuer distributing only eligi	ble foreign securities	and the distributio	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 subsid securities that are required by law to respectively. <sup>7</sup> Check this box if it applies to the cu clients. Refer to the definitions of "e	o be owned by its dir urrent distribution evo	ectors, are benefic en if the issuer mad	ially owned by the re de previous distributi	eporting issuer or t ions of other types	the foreign	public is	suer,	
If the issuer is none of the			. ,					
a) Directors, executive officer	·							
Provide the following information for territory; otherwise state the country.						tate the	province	or
Organization or company name	Organization or company name       Family name       First given name       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 within Canada, state the province or	•	-				-		
Organization or company name	Family name	First given name	Secondary given names	Residential jurisdiction of individual	Rela (select c	tionship one or bo	to promo oth if appl	oter icable)
				Province or country	D		С	)
c) Residential address of eac		.,	, ,	111 1 11 11 1				
Complete Schedule 2 of this form completed report. Schedule 2 also					(a) and (b)	and at	tach to ti	1e

### **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	BevCanna Enterprises Inc.							
Full legal name	Leone							
	Family name	First given name		Seconda	iry given nai	mes		
Title	Chief Executive Officer							
Telephone number	6046121175	Email address	marcello	@bevcan	na.com			
Signature	"Marcello Leone" Date			02	17			
			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	Koleszar	Alissa			Title	Securities Paralegal
	Family name	First given name	Secondary gi	iven names		
Name of company	Clark Wilson LLP					
Telephone number	6048917720	E	mail address	akoleszar@o	cwilson.c	om

#### 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.