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: EDR1538782906243-272 (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.
✓ 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 investment fund, about the fund.
Full legal name
Greenway Greenhouse Cannabis Corporation
Previous full legal name If the issuer's name changed in the last 12 months, provide most recent previous legal name.
2644639 Ontario Inc.
Website (if applicable)
www.greenwayghc.com
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? V 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, µ Full legal name	provide the underw	vriter's full leg	gal name and firm NRD number.			
Does the Underwriter's Firm have an NRD Number? Firm NRD number No Yes 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 <i>(if applicable)</i>			

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						
If the issuer is in the mining industry , ind the mining industry. Select the category th Exploration Development Produc	at best describes the issuer's			nat provide services to issuers operating in		
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 √Yes	If yes, provide SEDAR profile 00046137	number:	screenshot of the	DAR profile is a "private" profile, please provide a issuer's profile by e-mail to ngs@osc.gov.on.ca		
d) Head office address		If the i	ssuer does not h	ave a SEDAR profile, complete Item 5(d) – (h).		
Street address	Municipality	Province/Sta	ite	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.				
NS NU ON PE	QC SK YT					
g) Public listing status						
Does the issuer have a CUSIP number?	CUSIP number (provide first	t 6 aigits only)				
If the issuer is publicly listed, provide the r exchange and not a trading facility such as	-			imarily trade. Provide only the name of an		
Exchange name:	onto Stock Exchange	TSX Venture	Exchange	Canadian Securities Exchange		
Aequitas Neo Exchange	tralian Securities Exchange	Deutsche Bo	erse	Euronext		
London Stock Exchange						
Shenzhen Stock Exchange	ck Exchange Of Hong Kong 🗌	Tokyo Stock	Exchange	OTHER		
If other, describe:						
h) Size of issuer's assets						
financial statements for its first financial ye	ear, provide the size of the issu	ier's assets a	t the distribution er	anadian \$). If the issuer has not prepared annual nd date.		
	1 to under \$25M	\$25M to und \$1B or over	σιφτουνι			

ITEM 7 - INFORMATION	ABOUT THE L		ON			
If an issuer located outside of C resident in that jurisdiction of C distribution, which must be disc	anada only. Do not	include in Item	7 securities issued	as payment of com	missions or finder's fee	es in connection with the
a) Currency						
Select the currency or currencies			de. All dollar amoui	nts provided in the re	eport must be in Canac	lian dollars.
b) Distribution date(s)						
State the distribution start and date as both the start and end the distribution period covered Start Date E	dates. If the report i					
2018-09-27 2	018-09-27					
c) Detailed purchaser inform	nation					
Complete <u>Schedule 1</u> of this f	form for each purc	haser and atta	ch the schedule to	the completed rep	oort.	
180927 45-106F1 Sch	ed 1(amend).xlsx - {	55 KB				
d) Types of securities distrib	outed					
Provide the following informatic		s reported on a	por socurity basis	Pofor to Part A(12)	of the Instructions for	how to indicate the securit
code. If providing the CUSIP nu						low to indicate the second
			[Canadian \$	
Security code	e	CUSIP number	Number of securities	Single or lowest price	Highest price	Total amount
CMS		39679F104	2,000,000.0000	0.2500	0.2500	500,000.0000
Description of security:						
e) Details of rights and conv	/ertible/exchangea	able securities	5			
If any rights (e.g. warrants, opti- securities were distributed, prov Not Applicable Convertible / Underlying exchangeable security	,	ratio and descr	•	for each convertible		ty.
security code code	Lowest	Highest		/		
Describe other terms: (if applicable)						
f) Summary of the distribution	on by jurisdiction	and exemption	n			
State the total dollar amount of purchaser resides and for each distribution in a jurisdiction of C This table requires a separate li resides, if a purchaser resides i For jurisdictions within of Canad	securities distribute exemption relied of Canada, include dist ine item for (i) each in a jurisdiction of C	ed and the num n in Canada for ributions to pur jurisdiction whe anada, and (iii)	ber of purchasers for that distribution. Ho chasers resident in ere a purchaser resi each exemption re	owever, if an issuer that jurisdiction of C ides (ii) each exemp lied on in Canada, il	located outside of Can Canada only. tion relied on in the jur	ada completes a isdiction where a purchase
Province or country		Exemption relied on			No. of unique purchasers ^{2a}	Total amount (Canadian \$)
Ontario	NI 45-106 2.3	NI 45-106 2.3 [Accredited investor] 7 40,0				40,000.0000
Ontario	NI 45-106 2.5	NI 45-106 2.5 [Family, friends and business associates]			55	420,500.0000
British Columbia	NI 45-106 2.3	Accredited inve	estor]		2	26,000.0000
British Columbia	NI 45-106 2.5	[Family, friends	and business asso	ociates]	5	8,500.0000
New Brunswick	NI 45-106 2.5	[Family, friends	and business asso	ociates]		2,500.0000
United States	NI 45-106 2.5	[Family, friends	and business asso	ociates]		2,500.0000
Total dollar amount of securities distributed 500,000.0000						

Total number of unique purchasers^{2b}

71

^{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	Date of document or other material	Previously filed with or delivered to regulator?	Previously filed Submission ID	Filename
1.			Y N		

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 individual, provide the full legal name of the individual.							
Family name First given name Secondary given names							
If the person compensated is not an individual, provide the following information							
If the person compensated is not an individual, provide the following information.							
Full legal name of non-individual Firm NRD number (if applicable)							
Indicate whether the person compensate	ed facilitated the distribution thro	ough 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 Part B(2) of the Instructions and the me	aning of "control" in section 1.4		leting this section.				
Insider of the issuer (other than an inv	vestment fund)	None of the above					
Director or officer of the investment fu	nd of investment lund manager						
d) Compensation details							
Provide details of all compensation paid in Canadian dollars. Include cash comm for services incidental to the distribution about, or report on, internal allocation and	nissions, securities-based comp n, such as clerical, printing, lega	ensation, gifts, discounts or other com I or accounting services. An issuer is r	pensation. Do not report payments not required to ask for details				
Cash commissions paid							
Value of all securities	Security code1	Security code2	Security code3				
distributed as			Security codes				
compensation ⁴	Describe terms of	warrants, options or other rights					
Other compensation ⁵	Describe						
Total company stire Daid	0.0000						
Total compensation Paid	0.0000						
Check box if the person will or may i	eceive any deferred compensat	ion (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.

J Foreign pub	lic issuer			
Wholly own	ed subsidiary of a reporting issuer in any ju	risdiction of Canada ⁶		
	e of reporting issuer			
-	ed subsidiary of a foreign public issuer ⁶			
Provide nam	ne of foreign public issuer			
			. 7	
	buting only eligible foreign securities and th r is at least one of the above, do not co			
⁶ An issuer i	s a wholly owned subsidiary of a reporting	issuer or a foreign public issuer if al	ll of the issuer's outstanding voting s	
	hat are required by law to be owned by its d			•
	box if it applies to the current distribution e or to the definitions of "eligible foreign secu			s to non-permitted
If the issue	r is none of the above, check this box a	nd complete Item 9(a) – (c).		
) Directors, e	executive officers and promoters of the i	ssuer		
avida the falls	wing information for anotheling store average	in officer and promotor of the issuer	. For locations within Canada state	the province or
	owing information for each director, executiv			the province or
rritory, otherw	ise state the country. For "Relationship to is	SSUEP, D = Director, O = Executi	ve Onicer, P – Promoter.	
	organization or company name	Family name First given name Secondary given name	Business location of non-individual or residential jurisdiction of individual	Relationship to issuer (select all that apply)
ndividual?	· ·	Family name First given name Secondary given name	Business location of non-individual or residential jurisdiction of individual	issuer (select all that apply)
ndividual?	· ·	Family name First given name	Business location of non-individual or residential	issuer (select all that
ndividual?	· ·	Family name First given name Secondary given name Mastronardi	Business location of non-individual or residential jurisdiction of individual	issuer (select all that apply)
rritory, otherw ndividual? ZY _N	· ·	Family name First given name Secondary given name Mastronardi	Business location of non-individual or residential jurisdiction of individual	issuer (select all that apply)
ndividual?	· ·	Family name First given name Secondary given name Mastronardi Carl	Business location of non-individual or residential jurisdiction of individual Ontario	issuer (select all that apply)] ✓ D ✓ O □ P
ndividual?	· ·	Family name First given name Secondary given name Mastronardi Carl Peddle	Business location of non-individual or residential jurisdiction of individual Ontario	issuer (select all that apply)] ✓ D ✓ O □ P
ndividual?	· ·	Family name First given name Secondary given name Mastronardi Carl Peddle	Business location of non-individual or residential jurisdiction of individual Ontario	issuer (select all that apply) ✓D ✓O P ✓D ✓O P
ndividual?	· ·	Family name First given name Secondary given name Mastronardi Carl Peddle Darren	Business location of non-individual or residential jurisdiction of individual Ontario	issuer (select all that apply) ✓D ✓O P ✓D ✓O P
ndividual?	· ·	Family name First given name Secondary given name Mastronardi Carl Peddle Darren D'Alimonte	Business location of non-individual or residential jurisdiction of individual Ontario	issuer (select all that apply) ✓D ✓O P ✓D ✓O P
ndividual?	· ·	Family name First given name Secondary given name Mastronardi Carl Peddle Darren D'Alimonte	Business location of non-individual or residential jurisdiction of individual Ontario	issuer (select all that apply) ✓D ✓O P ✓D ✓O P
ndividual?	· ·	Family name First given name Secondary given name Mastronardi Carl Peddle Darren D'Alimonte Jamie	Business location of non-individual or residential jurisdiction of individual Ontario Ontario Ontario Ontario	issuer (select all that apply) ↓ D ↓ O P ↓ D ↓ O P ↓ D ↓ O P
IY IN	· ·	Family name First given name Secondary given name Mastronardi Carl Peddle Darren D'Alimonte Jamie Pimiskern	Business location of non-individual or residential jurisdiction of individual Ontario Ontario Ontario Ontario	issuer (select all that apply) ↓ D ↓ O P ↓ D ↓ O P ↓ D ↓ O P

Organization or company name	Family name First given name Secondary given name	Residential jurisdiction of individual	Relationship to promoter (select one or both if applicable)		
			_D_O		
c) Residential address of each individual					

Complete <u>Schedule 2</u> 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.

180927 45-106F1 Sched 2(amend).xlsx - 35 KB

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 Green	Greenway Greenhouse Cannibis Corporation				
Full legal name - Family name	First given name		Secondary given names		
D'Alimonte	Jamie				
Title		Telephone number	Email address		
Chief Executive Officer		5197967210	jamied@delfrescopure.com		
Signature "Jamie D'Alimonte"		Date 2018-10-10			

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
Moroney	Donna	М.		President
Name of company	Telephone number	Email address		
Wiklow Corporate Services Inc.		6046964236	dmoroney@wiklow.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.

EDR1539198785-442	2018-10-10 19:15:18.798	
Submission ID	Date	