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

ITEM 1 – REPORT TYPE Image: New report Image: Amended report If amended, provide Submission ID of report that is being amended: Image: EDR1234567890-123)
Amended report If amended, provide Submission ID of report that is being amended: (Example: EDR1234567890-123)
ITEM 2 – PARTY CERTIFYING THE REPORT
Indicate the party certifying the report (select only one). For guidance regarding whether an issuer is an investment fund, refer to section 1.1 of National Instrument 81-106 Investment Fund Continuous Disclosure and the companion policy to NI 81-106.
✓ 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.
Website (if applicable)
www.greenway.ca
If the issuer has a legal entity identifier, provide below. Refer to Part B of the Instructions for the definition of "legal entity identifier".
Legal entity identifier
Did two or more co-issuers distribute a single security? 🗹 No 🗌 Yes
If two or more issuers distributed a single security, provide the full legal name(s) of the co-issuer(s) other than the issuer named above.
Full legal name(s) of co-issuer(s)

ITEM 4 – UNDERWRITER INFORMATION

If an underwriter is completing the report, µ Full legal name	provide the underwr	riter's full leg	gal name and firm NRD number.		
Does the Underwriter's Firm have an NRD	[Firm NRD n			
If the underwriter does not have a firm NR	D number, provide	the head off	ice contact information of the und	erwriter.	
Street address	Municipality		Province/State	Postal/ZIP code	
Country	Telephone numbe	er	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		that provide services to issuers operating in					
Is the issuer's primary business to invest a Mortgages Real estate Commer								
b) Number of employees								
√ 0 - 49 50 - 99 100 - 499 500	or more							
c) SEDAR profile number								
Does the issuer have a <u>SEDAR</u> profile ? ☐ No	If yes, provide SEDAR profile 00046137	screenshot of the	DAR profile is a "private" profile, please provide a e issuer's profile by e-mail to ings@osc.gov.on.ca					
d) Head office address		If the issuer does not I	have a SEDAR profile, complete Item 5(d) – (h).					
Street address	Municipality	Province/State	Postal/ZIP code					
Country	Telephone number							
e) Date of formation and financial yea	r-end							
Date of formation	Financial year-end	1						
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 digits only)						
If the issuer is publicly listed, provide the r exchange and not a trading facility such as	-		rimarily 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 Boerse	Euronext					
London Stock Exchange	daq	New York Stock Exchange	Shanghai 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	-		Canadian \$). If the issuer has not prepared annual and date.					
	0M to under \$1B	\$1B or over						

ITEM 7 – INFORMATION A	BOUT THE DISTRI	BUTION				
If an issuer located outside of Cana resident in that jurisdiction of Cana distribution, which must be disclose	da only. Do not include i	n Item 7 s	ecurities issued	as payment of comm	nissions or finder's	fees in connection with the
a) Currency						
Select the currency or currencies ir			All dollar amour	ts provided in the re _l	port must be in Car	nadian dollars.
b) Distribution date(s)						
State the distribution start and end date as both the start and end date the distribution period covered by to	es. If the report is being f					
Start Date End I 2021-12-23 2021	Date -12-23					
c) Detailed purchaser informati						
Complete <u>Schedule 1</u> of this form	-	d attach t	the schedule to	the completed repo	ort.	
211230 45106F1 Schedule						
d) Types of securities distribute	d					
Provide the following information fo code. If providing the CUSIP numb						or how to indicate the security
					Canadian \$	
Security code	CUSI		Number of securities	Single or lowest price	Highest price	Total amount
UBS	39679F	203 7	7,272,728.0000	1.1000		8,000,000.8000
Description of security: Units at a	price of \$1.10 per unit (e	each a"Un	it), consisting of	one common share	(each a "Share") ar	nd one Share purchase wa
e) Details of rights and convert	ible/exchangeable sec	urities				
If any rights (e.g. warrants, options, securities were distributed, provide			•			÷
	Exercise price					
Convertible / Underlying exchangeable security	(Canadian \$)		Expiry date (YYYY-MM-DD)		Conversion ra	atio
security code L	owest Highe		(1111 mm 22)			
WNT CMS	1.6500		2022-09-23	1:1	<u></u>	
Describe other terms: Valid for a p (if applicable)	period of 9 months from t	ne date of	r issuance at an	exercise price of \$1.	65 per Warrant Sha	are.
f) Summary of the distribution b	by jurisdiction and exe	mption				
State the total dollar amount of sec purchaser resides and for each exe distribution in a jurisdiction of Cana This table requires a separate line resides, if a purchaser resides in a For jurisdictions within of Canada, s	emption relied on in Cana ada, include distributions item for (i) each jurisdictio jurisdiction of Canada, a	ada for tha to purcha on where a nd (iii) ead	nt distribution. He sers resident in a purchaser resi ch exemption rel	owever, if an issuer lo that jurisdiction of Ca des (ii) each exempt lied on in Canada, if	ocated outside of C anada only. on relied on in the	anada completes a jurisdiction where a purchaser
Province or country		Exempt	ion relied on		No. of unique purchasers ^{2a}	Total amount (Canadian \$)
Ontario	NI 45-106 2.3 [Accredite	ed investo	r]		73	6,953,761.1000
British Columbia	NI 45-106 2.3 [Accredite	ed investo	r]		6	431,200.0000
British Columbia	Other – describe				1	24,999.7000
Other exemption: NI 45-106 2.24	Employee, exectuive offi	cer, direct	or, consultant			
United States	NI 45-106 2.3 [Accredite	ed investo	r]		1	220,000.0000
Quebec	NI 45-106 2.3 [Accredite	ed investo	r]		1	220,000.0000

NI 45-106 2.3 [Accredited investor]

NI 45-106 2.3 [Accredited investor]

Alberta

Nova Scotia

2

1

77,000.0000

55,000.0000

			,
France	NI 45-106 2.3 [Accredited investor]	1	18,040.0000
	8,000,000.8000		
281 I - I - the state of a second second			

^{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		

ITEM 8 – COMPENSATIO	N INFORMATION			
	son (as defined in NI 45-106) to wi Complete additional copies of			
Indicate whether any compensa ☐ No	tion was paid, or will be paid, in cc	onnection with the dis	ribution.	
PERSON 1				
a) Name of person compensation	ated and registration status			
Indicate whether the person cor	npensated is a registrant.			
If the person compensated is ar	n individual, provide the full legal n	ame of the individual.		
Family name	First given name	Second	lary given names	
If the person compensated is no	t an individual, provide the followi	ng information.		
Full legal name of non-individual		•	Firm NRD numb	er <i>(if applicable)</i>
Abingdon Capital Corporation			53830	
Indicate whether the person cor √No Yes	npensated facilitated the distribution	on through a funding p	oortal or an interr	net-based portal.
b) Business contact informat	ion			
If a firm NRD number is not pro	vided in Item 8(a), provide the bus	siness contact informa	ntion of the perso	n being compensated.
Street address	Municipality	Province/Sta	•	Postal/ZIP code
Country	Telephone number	Email addres	S	

c) Relationship to issuer or investment fund manager

Indicate the person's relationship with the issuer or investment fund manager (select all that apply). Refer to the meaning of "connected" in Part B(2) of the Instructions and the meaning of "control" in section 1.4 of NI 45-106 for the purposes of completing this section.

 Connected with the issuer or investment fund manager

Insider of the issuer (other than an investment fund)

✓ None of the above

Director or officer of the investment fund or investment fund manager

d) Compensation details

Provide details of all compensation paid, or to be paid, to the person identified in Item 8(a) in connection with the distribution. Provide all amounts in Canadian dollars. Include cash commissions, securities-based compensation, gifts, discounts or other compensation. Do not report payments for services incidental to the distribution, such as clerical, printing, legal or accounting services. An issuer is not required to ask for details about, or report on, internal allocation arrangements with the directors, officers or employees of a non-individual compensated by the issuer.

\checkmark	Cash commissions paid	412,682.5600						
\checkmark	Value of all securities	0.0000	Security code1 WNT Security code2 Security code3					
<u> </u>	distributed as compensation ⁴		Describe terms of warrants, options or other rights					
	413,816 non-transferable broker warrants valid for 24 months from the date of issu exercise price of \$1.65 per warrant share.							
	Other compensation ⁵		Describe					
	Total compensation Paid	412,682.5600						
	Check box if the person will o	or may receive any o	deferred compensation (describe the terms below)					

⁴ Provide the aggregate value of securities of the issuer. Indicate to acquire additional securities o ⁵ Do not include deferred comper	the security codes i f the issuer.	•	÷ .		-	-	
PERSON 2	isation.						
	and and registratic	an ototuo					
a) Name of person compensa	-						
Indicate whether the person com	pensated is a regis	trant.					
If the person compensated is an	•••	•					
Family name	First giv	en name	Secondary give	en names			
If the person compensated is not	an individual. provi	ide the followina infor	mation.				
Full legal name of non-individual		j		RD number <i>(if</i>	applicable)		
Canaccord Genuity Corp.			900				
Indicate whether the person com VNo Ves	pensated facilitated	l the distribution throu	igh a funding portal or	an internet-ba	nsed portal.		
b) Business contact information	on						
If a firm NRD number is not prov	ided in Item 8(a), p	rovide the business c	ontact information of t	he person bei	ng compensated.		
Street address	Municip	ality	Province/State		Postal/ZIP code	7	
Country	Country Telephone number Email address						
a) Palatianahin ta jaguar ar in	veetment fund me						
c) Relationship to issuer or in	vestment fund ma	anager					
Indicate the person's relationship Part B(2) of the Instructions and Connected with the issuer or in	the meaning of "co	ntrol" in section 1.4 o	f NI 45-106 for the pur	poses of com	-	n.	
Insider of the issuer (other tha	n an investment fun	nd)	✓ None of the a	bove			
Director or officer of the invest	ment fund or invest	ment fund manager					
d) Compensation details							
Provide details of all compensati in Canadian dollars. Include cash for services incidental to the dist about, or report on, internal alloc	h commissions, sec ribution, such as cl	curities-based competerical, printing, legal	nsation, gifts, discount or accounting services	ts or other con s. An issuer is	npensation. Do n not required to a	ot report payments sk for details	
Cash commissions paid	90,777.5000						
Value of all securities distributed as	0.0000	Security code1 WN	T Security co	de2	Security cod	le3	
compensation ⁴			arrants, options or oth		atha fuana tha data	of incurrence of on	
			able broker warrants va 65 per warrant share.	and for 24 mor	tins from the date	or issuance at an	
Other compensation ⁵		Describe					
Total compensation Paid	90,777.5000	ļ					
Check box if the person will c	or may receive any	deferred compensatio	on (describe the terms	below)		1	
⁴ Provide the aggregate value of securities of the issuer. Indicate to acquire additional securities o	the security codes	•	• •		-	-	

⁵ Do not include deferred compensation.

⁵ Do not include	deferred	compensation.
-----------------------------	----------	---------------

PERSON 3 a) Name of person compensated and registration status Indicate whether the person compensated is a registrant. \No Yes 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. Full legal name of non-individual Firm NRD number (if applicable) PI Financial Corp. 5290 Indicate whether the person compensated facilitated the distribution through a funding portal or an internet-based portal. \No Yes b) Business contact information If a firm NRD number is not provided in Item 8(a), provide the business contact information of the person being compensated. Street address Municipality Province/State Postal/ZIP code Country Telephone number Email address Country Telephone number Email address Country Telephone number Email address Country Telephone number Email address Telephone number Email address Country Telephone number
Indicate whether the person compensated is a registrant. No ☑ Yes 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. Full legal name of non-individual provide the distribution through a funding portal or an internet-based portal. ☑ No ☐ Yes b) Business contact information If a firm NRD number is not provided in Item 8(a), provide the business contact information of the person being compensated. Street address Municipality Province/State Postal/ZIP code ☐
No Yes 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. Full legal name of non-individual Pi Financial Corp. Indicate whether the person compensated facilitated the distribution through a funding portal or an internet-based portal. No ☐ Yes D Business contact information If a firm NRD number is not provided in Item 8(a), provide the business contact information of the person being compensated. Street address Municipality Province/State Postal/ZIP code Country Telephone number Email address Indicate the person's relationship with the issuer or investment fund manager (select all that apply). Refer to the meaning of "connected" in
Family name First given name Secondary given names If the person compensated is not an individual, provide the following information. Firm NRD number (if applicable) Full legal name of non-individual Firm NRD number (if applicable) PI Financial Corp. 5290 Indicate whether the person compensated facilitated the distribution through a funding portal or an internet-based portal. No Yes b) Business contact information If a firm NRD number is not provided in Item 8(a), provide the business contact information of the person being compensated. Street address Municipality Province/State Postal/ZIP code Country Telephone number Email address Image and address C) Relationship to issuer or investment fund manager (select all that apply). Refer to the meaning of "connected" in
Image: Construct of the person compensated is not an individual, provide the following information. Full legal name of non-individual Firm NRD number (if applicable) PI Financial Corp. 5290 Indicate whether the person compensated facilitated the distribution through a funding portal or an internet-based portal. Image: Construct of the person compensated facilitated the distribution through a funding portal or an internet-based portal. Image: Construct of the person compensated facilitated the distribution through a funding portal or an internet-based portal. Image: Construct of the person compensated facilitated the distribution through a funding portal or an internet-based portal. Image: Construct of the person compensated facilitated the distribution through a funding portal or an internet-based portal. Image: Construct of the person compensated facilitated the distribution through a funding portal or an internet-based portal. Image: Construct of the person compensated facilitated the distribution through a funding portal or an internet-based portal. Image: Construct of the person being compensated. If a firm NRD number is not provided in Item 8(a), provide the business contact information of the person being compensated. Image: Construct of the person being compensated. Street address Municipality Province/State Postal/ZIP code Country Telephone number Email address Country Telephone number Email address <td< td=""></td<>
Full legal name of non-individual Firm NRD number (if applicable) PI Financial Corp. 5290 Indicate whether the person compensated facilitated the distribution through a funding portal or an internet-based portal. No Yes b) Business contact information If a firm NRD number is not provided in Item 8(a), provide the business contact information of the person being compensated. Street address Municipality Province/State Postal/ZIP code Country Telephone number Email address c) Relationship to issuer or investment fund manager (select all that apply). Refer to the meaning of "connected" in
PI Financial Corp. 5290 Indicate whether the person compensated facilitated the distribution through a funding portal or an internet-based portal. No Yes b) Business contact information If a firm NRD number is not provided in Item 8(a), provide the business contact information of the person being compensated. Street address Municipality Province/State Postal/ZIP code Country Telephone number Email address c) Relationship to issuer or investment fund manager (select all that apply). Refer to the meaning of "connected" in
✓ No Yes b) Business contact information If a firm NRD number is not provided in Item 8(a), provide the business contact information of the person being compensated. Street address Municipality Province/State Postal/ZIP code Country Telephone number Email address c) Relationship to issuer or investment fund manager (select all that apply). Refer to the meaning of "connected" in
If a firm NRD number is not provided in Item 8(a), provide the business contact information of the person being compensated. Street address Municipality Province/State Postal/ZIP code Country Telephone number Email address Country Telephone number Email address c) Relationship to issuer or investment fund manager (select all that apply). Refer to the meaning of "connected" in
Street address Municipality Province/State Postal/ZIP code Country Telephone number Email address Indicate the person's relationship with the issuer or investment fund manager (select all that apply). Refer to the meaning of "connected" in
Image: state of the state
c) Relationship to issuer or investment fund manager Indicate the person's relationship with the issuer or investment fund manager (select all that apply). Refer to the meaning of "connected" in
c) Relationship to issuer or investment fund manager Indicate the person's relationship with the issuer or investment fund manager (select all that apply). Refer to the meaning of "connected" in
Indicate the person's relationship with the issuer or investment fund manager (select all that apply). Refer to the meaning of "connected" in
Indicate the person's relationship with the issuer or investment fund manager (select all that apply). Refer to the meaning of "connected" in
Part B(2) of the Instructions and the meaning of "control" in section 1.4 of NI 45-106 for the purposes of completing this section. Connected with the issuer or investment fund manager Insider of the issuer (other than an investment fund) Insider of the investment fund or investment fund manager
d) Compensation details
Provide details of all compensation paid, or to be paid, to the person identified in Item 8(a) in connection with the distribution. Provide all amounts in Canadian dollars. Include cash commissions, securities-based compensation, gifts, discounts or other compensation. Do not report payments for services incidental to the distribution, such as clerical, printing, legal or accounting services. An issuer is not required to ask for details about, or report on, internal allocation arrangements with the directors, officers or employees of a non-individual compensated by the issuer.
Cash commissions paid 6,325.0000
Value of all securities 0.0000 Security code1 WNT Security code2 Security code3 Image: Value of all securities 0.0000 Security code1 WNT Security code2 Security code3 Image: Value of all securities 0.0000 Security code1 WNT Security code2 Security code3 Image: Value of all securities Describe terms of warrants, options or other rights Security code3 Security code3 Image: Value of all securities 5,750 non-transferable broker warrants valid for 24 months from the date of issuance at an exercise price of \$1.65 per warrant share. Security code3
Other compensation ⁵ Describe
Total compensation Paid 6,325.0000
Check box if the person will or may receive any deferred compensation (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 exercisal

⁵ Do not include deferred compensation.

PERSON 4

Indicate whether the person comp ☐ No	pensated is a regis	trant.				
If the person compensated is an i		-				
Family name		en name	Secondary given na	mes		
If the person compensated is not Full legal name of non-individual	an individual, provi	de the following informat		umbor (if applicable	0)	
BMO Nesbitt Burns Inc.			2580	umber <i>(if applicabl</i> e	e)	
Indicate whether the person comp	oensated facilitated	the distribution through	a tunding portal or an in	nternet-based porta	<i>11.</i>	
b) Business contact information	on					
If a firm NRD number is not provi	ded in Item 8(a), pi	rovide the business cont	tact information of the pe	erson being compe	ensated.	
Street address	Municip	ality Pr	rovince/State	Postal/Z	IP code	
Country	Telepho	ne number Er	mail address			
c) Relationship to issuer or in	vestment fund ma	anager				
Indicate the person's relationship Part B(2) of the Instructions and a Connected with the issuer or in	the meaning of "col	ntrol" in section 1.4 of N	I 45-106 for the purpose		is section.	d" in
Insider of the issuer (other than	n an investment fun	ıd)	✓ None of the above			
Director or officer of the investr	ment fund or investi	ment fund manager				
d) Compensation details						
Provide details of all compensation in Canadian dollars. Include cash for services incidental to the distr about, or report on, internal alloca	n commissions, sec ribution, such as cl	curities-based compensa erical, printing, legal or a	ntion, gifts, discounts or accounting services. An	other compensatio issuer is not requi	n. Do not report red to ask for de	t payments etails
✓ Cash commissions paid	42,515.0000					
Value of all securities		Security code1	Security code2	Secu	urity code3	
└── distributed as compensation ⁴		Describe terms of warra	ants, options or other rig	phts		
Other compensation ⁵		Describe				
Total compensation Paid	42,515.0000					
Check box if the person will o	r may receive any o	deferred compensation (describe the terms below	w)		
⁴ Provide the aggregate value of a	ll an auritian diatrik					

ITEM 9 – DIRECTORS, EXECUTIVE OFFICERS AND PROMOTERS OF THE ISSUER							
Indicate whether the issuer is any of the following (select the one that applies - if more than one applies, select only one). $\overline{\checkmark}$ 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 issuer						
	wind the second the second the	diatribution is to permitted alignts a	nly 7				
 Issuer distributing only eligible foreign securities and the distribution is to permitted clients only⁷ If the issuer is at least one of the above, do not complete Item 9(a) – (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. 							
☐ If the iss	uer is none of the above, check this box an	d complete Item 9(a) – (c).					
a) Directors	executive officers and promoters of the is	suer					
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.							
Individual?	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)			
Y N				D O P			
			L				
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 company name	Family name First given name Secondary given name	Residential jurisdiction of individual	Relationship to promoter (select one or both if applicable)			
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.							

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 Greenway Greenhouse Cannabis Corporation					
Full legal name - Family name	First given na	First given name			Secondary given names
Peddle Darre					
Title			one number	Em	ail address
CFO			5197120311 da		enp@greenway.ca
Signature Darren Peddle		Date	2021-12-30		

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	
Brown	Andrew		President	
Name of company		Telephone number	Email address	
Lions Corporate Secretarial Service	es Limited	2365585438	andrew@lionscorporateservices.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 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.

EDR1640901460143-767	2021-12-30 16:57:40.143		
Submission ID	Date		