Form 45-106F1 Report of Exempt Distribution

BCSC EDER Reference Number 9637132

| ITEM 1 - REPORT TYPE | | | | | | | | | | | |
|---|--|--------------|-----------|-------------|----------|-------------|------------|----------------|-----------------|-------------|-----------------|
| ✓ New report | | | | | | | | | | | |
| Amended report | lf amer | nded, pro | vide f | iling da | te of | report | that is t | being ame | ended | | (YYYY-MM-DD) |
| TEM 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. Investment fund issuer | | | | | | | | | | | |
| ✓ Issuer (other than an investment fund) | | | | | | | | | | | |
| | | | na) | | | | | | | | |
| | | | | | | | | | | | |
| ITEM 3 - ISSUER NAME | AND OT | HER IDE | NTIFIE | RS | | | | | | | |
| Provide the following informat | Provide the following information about the issuer, or if the issuer is an investment fund, about the fund. | | | | | | | | | | |
| Full le | egal name | Potent | Ventu | res Inc. | 1 | | | | | | |
| Previous full le | Previous full legal name | | | | | | | | | | |
| If the issuer's name ch | anged in the | e last 12 ma | onths, pi | rovide ma | ost rece | ent previ | ious legal | name. | | | |
| | Website (if applicable) | | | | | | | | | | |
| If the issuer has a legal entity i | 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 | | | | | | | | | | |
| If two or more issuers distribut | ed a single s | ecurity, pro | vide the | e full lega | ıl name | e(s) of the | e co-issue | er(s) other th | an the issuer n | named above | |
| Full legal name(s) of co | o-issuer(s) | | | | | | | (if applicable | e) | | |
| | | | | | | | | | | | |
| ITEM 4 - UNDERWRITER | R INFORM | 1ATION | | | | | | | | | |
| If an underwriter is completing | the report, | provide the | underw | vriter's fu | ll legal | name ai | nd firm N | IRD number. | | | _ |
| Full legal name | | | | | | | | | | | |
| Firm NRD number | | | | | | | (if appl | licable) | | | |
| If the underwriter does not hav | ve a firm NR | D number, | provide | the head | office | contact | informati | ion of the un | derwriter. | | |
| Street address | | | | | | | | | | |] |
| Municipality | | | | | | | Provir | nce/State | | | ĺ |
| Country | | | | | | Post | tal code | /Zip code | | | j |
| 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 1 1 1 9 9 9 |
| If the issuer is in the mining industry , indicate the stage of operations. This does not apply to issuers that provide services to issuers operating in the mining industry. Select the category that best describes the issuer's stage of operations. Exploration Development Production |
| Is the issuer's primary business to invest all or substantially all of its assets in any of the following? If yes, select all that apply. |
| Mortgages Real estate Commercial/business debt Consumer debt Private companies |
| Cryptoassets |
| b) Number of employees |
| Number of employees: 🗹 0 - 49 🗌 50 - 99 🗌 100 - 499 🗌 500 or more |
| c) SEDAR profile number |
| Does the issuer have a SEDAR profile? |
| No ✓ Yes If yes, provide SEDAR profile number 0 0 1 6 3 0 0 |
| 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 |
| f) Reporting issuer status |
| Is the issuer a reporting issuer in any jurisdication of Canada? No Yes |
| If yes, select the jurisdictions of Canada in which the issuer is a reporting issuer. |
| AII AB BC MB NB NL NT |
| NS NU ON PE QC SK YT |
| g) Public listing status |
| If the issuer has a CUSIP number, provide below (first 6 digits only) |
| CUSIP number |
| If the issuer is publicly listed, provide the name of the exchange on which the issuer's equity securities primarily trade. Provide only the name of an exchange and not a trading facility such as, for example, an automated trading system. |
| Exchange name |
| h) Size of issuer's assets |
| Select the size of the issuer's assets based on its most recently available annual financial statements (Canadian \$). If the issuer has not prepared annual financial statements for its first financial year, provide the size of the issuer's assets at the distribution end date. |

| \$0 to under \$5M | \$5M to under \$25M | □ \$25M to under \$100M |
|-----------------------|---------------------|-------------------------|
| S100M to under \$500M | S500M to under \$1B | S1B or over |

| ib close is an investment fund, provide the following information: iiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiii |
|---|
| Full legal name |
| Firm NRD number |
| If the investment fund manager does not have a firm NRD number, provide the head office contact information of the investment fund manager. Street address Municipality Country Postal code/Zjp code Telephone number Website (if applicable) D Type of investment fund Type of investment fund fund that most accurately identifies the issuer (select only one). Money market Country Postal code/Zjp code Indicate whether one or both of the following apply to the investment fund. Invests primarily in other investment fund issuers Country Indicate whether one or both of the following apply to the investment fund. Invests primarily in other investment fund issuers Indicate whether one or both of the following apply to the investment fund. Invests primarily in other investment of Transferable Securities funds (UCITs Funds) are investment funds regulated by the European Union (EU) directives that allow collective investment fund Date of formation and financial year-end of the investment fund Type, select the jurisdictions of Canada in which the investment fund is a reporting issuer Municipality Yes, select the jurisdicticins of Canada in which the investment fund is a reporting issuer No NS NS ND NS ND ON Public listing s |
| Street address Municipality Province/State Country Postal code/Zip code Telephone number Website (if applicable) Type of investment fund Type of investment fund that most accurately identifies the issuer (select only one). Money market Equity Fixed income Alternative strategies Cryptoasset Other (describe) Indicate whether one or both of the following apply to the investment fund. Invests primarily in other investment fund issuers Is a UCITs Fund 'Understriking for the Collective Investment of Transferable Securities funds (UCITs Funds) are investment funds regulated by the European Union fEU) directives that allow collective Investment fund issuers Is a UCITs Fund 'Understriking for the Collective Investment of Transferable Securities funds (UCITs Funds) are investment funds regulated by the European Union fEU) directives that allow collective Investment schemes to operate throughout the EU on a passport basis on authorization from one member state. O Date of formation and financial year-end of the investment fund is a reporting issuer. YYYY MM DD MM |
| Municipality Province/State Country Postal code/Zip code Telephone number Website (if applicable) b) Type of investment fund Website (if applicable) The of investment fund that most accurately identifies the issuer (select only one). Municipality Fixed income Alternative strategies Cryptoasset Other (describe) Indicate whether one or both of the following apply to the investment fund. Invests primarily in other investment fund issuers Is a UCITs Fund Undicate whether one collective investment fund issuers Is a UCITs Fund Undersking for the Collective investment of Transforable Securities funds (UCITs Funds) are investment funds regulated by the European Union (EU) directives that allow collective investment schemes to operate throughout the EU on a passport basis on authorization from one member state. O bate of formation and financial year-end of the investment fund is a reporting issuer status of the investment fund a reporting issuer status of the investment fund is a reporting issuer. MM DD MM DD MM DD MM DD MM DD MM DD MI DD |
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| d) Reporting issuer status of the investment fund Is the investment fund a reporting issuer in any jurisdication of Canada? No If yes, select the jurisdictions of Canada in which the investment fund is a reporting issuer. All AB BC MB NB NL NT NS NU ON PE QC SK YT e) Public listing status of the investment fund If the investment fund has a CUSIP number, provide below (first 6 digits only) CUSIP number USIP number |
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| If the investment fund has a CUSIP number, provide below (first 6 digits only) CUSIP number |
| CUSIP number |
| If the investment fund is publicly listed, provide the name of the exchange on which the investment fund's securities primarily trade. Provide only the |
| |
| name of an exchange and not a trading facility such as, for example, an automated trading system. |
| Exchange name |
| f) Net asset value (NAV) of the investment fund |
| Select the NAV range of the investment fund as of the date of the most recent NAV calculation (Canadian \$). |
| |
| \$0 to under \$5M \$5M to under \$25M \$25M to under \$100M \$100M to under \$500M \$500M to under \$1B \$1B or over Date of NAV calculation: |

ITEM 7 - INFORMATION ABOUT THE DISTRIBUTION

| purchasers resident in that jurisd | nada completes a distribution in a juris iction of Canada only. Do not include i which must be disclosed in Item 8. The | n Item 7 securities issue | ed as payment of | ^r commissions or fi | nder's fees in | | | | | | |
|---|---|---------------------------------|-------------------------------|---|------------------------|--|--|--|--|--|--|
| a) Currency | | | | | | | | | | | |
| Select the currency or currencies in which the distribution was made. All dollar amounts provided in the report must be in Canadian dollars. | | | | | | | | | | | |
| ✓ Canadian dollar US dollar Euro Other (describe) | | | | | | | | | | | |
| b) Distribution date(s) | | | | | | | | | | | |
| as both the start and end dates. I distribution period covered by the | State the distribution start and end dates. If the report is being filed for securities distributed on only one distribution date, provide the distribution date as both the start and end dates. If the report is being filed for securities distributed on a continuous basis, include the start and end dates for the distribution period covered by the report. Start date 2021 10 13 End date 2021 10 13 | | | | | | | | | | |
| | YYYY MM DD | | YYYY | MM DD | | | | | | | |
| c) Detailed purchaser info | rmation | | | | | | | | | | |
| | s form for each purchaser and a | ttach the schedule | to the comple | eted report. | | | | | | | |
| d) Types of securities dist | ributed | | - | - | | | | | | | |
| | n for all distributions reported on a per | security basis. Refer to | Part A(12) of the | e Instructions for h | ow to indicate the | | | | | | |
| security code. If providing the CU | ISIP number, indicate the full 9-digit Cl | USIP number assigned | to the security be | eing distributed. | | | | | | | |
| | | | | Canadian \$ | | | | | | | |
| Security code CUSIP number (if applicable) | Description of security | Number of securities | Single or lowest price | Highest price | Total amount | | | | | | |
| UBS94856V208Units, with each unit comprised of one common share and one common share purchase warrant.15,430,000.000.0400 | | | | | 617,200.00 | | | | | | |
| e) Details of rights and co | nvertible/exchangeable securities | | - L | | | | | | | | |
| | ns) were distributed, provide the exercis | | | | xchangeable securities | | | | | | |
| Convertible / exchangeable security code | Exercise price (Canadian \$) Lowest Highest | Expiry date (YYYY- MM-DD) | Conversion ratio | | tems (if applicable) | | | | | | |
| W N T C M S | 0.0500 0.0500 | 2023-10-13 | | Each warrant i \$0.05 for a per from date of is | | | | | | | |
| f) Summary of the distribu | tion by jurisdiction and exemption | I | | | | | | | | | |
| purchaser resides and for each ex distribution in a jurisdiction of Co This table requires a separate lin purchaser resides, if a purchaser jurisdiction. | 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 | | | | | | | | | | |
| Province or country | Exemption relied of | n | Number of uniqu purchasers | e ^{2ª} Total a | mount (Canadian \$) | | | | | | |
| Alberta | NI 45-106 2.3 [Accredited inv | restor] | | 1 | 50,000.00 | | | | | | |
| British Columbia | NI 45-106 2.3 [Accredited inv | vestor] | | 8 | 447,200.00 | | | | | | |
| British Columbia | NI 45-106 2.5 [Family, friends associates] | s and business | | 2 | 20,000.00 | | | | | | |
| Ontario | NI 45-106 2.3 [Accredited inv | vestor] | | 1 | 100,000.00 | | | | | | |
| | Tota | I dollar amount of se | curities distrib | uted | 617,200.00 | | | | | | |
| | Total number of | unique purchasers ^{2b} | | 12 | | | | | | | |

^{2a} In calculating the number of unique purchasers per row, count each purchaser only once. Joint purchasers may be counted as one purchaser.

^{2b} In calculating the total number of unique purchasers to which the issuer distributed securities, count each purchaser only once, regardless of whether the issuer distributed multiple types of securities to, and relied on multiple exemptions for, that purchaser.

g) Net proceeds to the investment fund by jurisdiction

If the issuer is an investment fund, provide the net proceeds to the investment fund for each jurisdiction of Canada and foreign jurisdiction where a purchaser resides.³ If an issuer located outside of Canada completes a distribution in a jurisdiction of Canada, include net proceeds for that jurisdiction of Canada only. For jurisdictions within Canada, state the province or territory, otherwise state the country.

| Province or country | Net proceeds (Canadian \$) |
|---|-------------------------------|
| | |
| Total net proceeds to the investment fund | |

³"Net proceeds" means the gross proceeds realized in the jurisdiction from the distributions for which the report is being filed, less the gross redemptions that occurred during the distribution period covered by the report.

h) Offering materials - This section applies only in Saskatchewan, Ontario, Québec, New Brunswick and Nova Scotia.

If a distribution has occurred in Saskatchewan, Ontario, Québec, New Brunswick or Nova Scotia, complete the table below by listing the offering materials that are required under the prospectus exemption relied on to be filed with or delivered to the securities regulatory authority or regulator in those jurisdictions.

In Ontario, if the offering materials listed in the table are required to be filed with or delivered to the Ontario Securities Commission (OSC), attach an electronic version of the offering materials that have not been previously filed with or delivered to the OSC.

| Description | Date of document or other material (YYYY-MM-DD) | Previously filed with or delivered to regulator? (Y/N) | Date previously filed or delivered (YYYY-MM-DD) |
|-------------|---|---|---|
| | | | |

| тем 8 - Со | MPENSATIC | ON INFORMATION | |
|---------------|----------------|---|------------------------|
| • | | person (as defined in NI 45-106) to whom the issuer directly provides, or will provide, any compensation Iditional copies of this page if more than one person was, or will be, compensated. | ion in connection with |
| Indicate whet | her any comper | nsation was paid, or will be paid, in connection with the distribution. | |
| 🗌 No | ✓ Yes | If yes, indicate number of persons compensated. | |

| a) Name of person compensate | ed and registrat | ion status | | | | | | | |
|--|--|--------------------------------------|--|-----------------------------|-------------------------|-------------------------|--------------|---------------|--------------|
| Indicate whether the person compensa | ited is a registrant | | No No | \checkmark | Yes | | | | |
| If the person compensated is an individ | dual, provide the r | name of the indiv | vidual. | | | | | | |
| Full legal name of individual | | | | | | | | | |
| | Fam | ily name | F | irst given n | ame | | Secor | ndary given r | names |
| If the person compensated is not an in | dividual, provide t | he following info | ormation. | | | | | | |
| Full legal name of nor | n-individual Ca | naccord Genu | ity Corp. | | | | | | |
| Firm NF | RD number | 9 0 0 | | | | (if applie | cable) | | |
| Indicate whether the person compensa | ted facilitated the | distribution thro | ough a funding p | ortal or ar | n internet- | -based po | ortal. | ✓ No | > 🗌 Yes |
| b) Business contact information | ſ | | | | | | | | |
| If a firm NRD number is not provided i | in Item 8 (a), provi | ide the business | contact informati | ion of the | person be | eing comp | pensated. | | |
| Street address | | | | | | | | | |
| Municipality | | | | P | Province/ | /State | | | |
| Country | | | | Postal o | code/Zip | code | | | |
| Email address | | | | Telep | phone nu | umber | | | |
| c) Relationship to issuer or inve | estment fund m | anager | | | | | | | |
| Indicate the person's relationship with the Instructions and the meaning of "c | | | | | | | ning of "cor | nnected" in | Part B(2) of |
| Connect with the issuer or ir | | | | _ | • | | er than an i | investment | fund) |
| Director or officer of the inve | stment fund or in | vestment fund n | nanager | Employ | /ee of the | issuer o | r investme | nt fund ma | nager |
| None of the above | | | | - | | | | | |
| d) Compensation details | | | | | | | | | |
| Provide details of all compensation pai Canadian dollars. Include cash commis incidental to the distribution, such as cl allocation arrangements with the direc | sions, securities-b lerical, printing, le | ased compensati gal or accounting | ion, gifts, discoun g services. An issi | its or othe uer is not i | r compen: required t | sation. De o ask for | o not repor | rt payments | for services |
| Cash commissions paid | 22,416.0 | 00 | | | Security c | ode 1 | Security co | de 2 Sec | urity code 3 |
| Value of all securities distributed as compensation ⁴ | | | Security codes | | C M | S | W N | т | |
| Describe terms o | f warrants, option | s or other rights | 560,400 find years from d | | | ercisabl | e at \$0.05 | 5 for a per | iod of 2 |
| Other compensation⁵ | | Describe | | | | | | | |
| Total compensation paid | 22,416.0 | 00 | | | | | | | |
| Check box if the person w | ill or may receive | any deferred co | mpensation (des | scribe the | terms be | low) | | | |
| | | | | | | | | | |
| ⁴ Provide the aggregate value of all se additional securities of the issuer. Ind rights exercisable to acquire additiona ⁵ Do not include deferred compensation | licate the security al securities of the | codes for all see | | | | | | | |

| a) Name of person compe | nsated and regist | ration status | | | | | |
|--|---|--|--|--------------------------------|----------------------------------|-------------------|----------------------|
| Indicate whether the person comp | pensated is a registra | int. | No No | ✓ Y | ′es | | |
| If the person compensated is an i | ndividual, provide th | e name of the indivi | dual. | | | | |
| Full legal name of individ | lual | | | | | | |
| | Fa | amily name | Firs | st given nam | ne | Secondary | given names |
| If the person compensated is not | - | - | | | | | |
| Full legal name o | f non-individual | Haywood Securiti | es Inc. | | | | |
| Firr | m NRD number | 1 6 3 | 0 | | (if app | olicable) | |
| Indicate whether the person comp | pensated facilitated t | he distribution through | ugh a funding por | rtal or an in | nternet-based | portal. | 🖊 No 🗌 Yes |
| b) Business contact inform | ation | | | | | | |
| If a firm NRD number is not prov | ided in Item 8 (a), pr | ovide the business c | ontact informatio | n of the per | rson being cor | mpensated. | |
| Street address | | | | | | | |
| Municipality | | | | Pro | vince/State | | |
| Country | | | F | Postal coo | de/Zip code | | |
| Email address | | | | Telepho | one number | | |
| c) Relationship to issuer of | r investment fund | manager | | | | | |
| Indicate the person's relationship | | | | | | | ted" in Part B(2) of |
| the Instructions and the meaning | | | or the purposes o | - | - | | stmont fund) |
| Connect with the issue | | - | | | | her than an inve | |
| Director or officer of the | e investment fund or | investment fund m | anager | Employee | e of the issuer | or investment fu | nd manager |
| ✓ None of the above | | | | | | | |
| d) Compensation details | | | | | | | |
| Provide details of all compensatio Canadian dollars. Include cash con incidental to the distribution, such allocation arrangements with the | mmissions, securities as clerical, printing, | -based compensation legal or accounting | on, gifts, discounts services. An issue | s or other co er is not req | ompensation. Juired to ask fo | Do not report pa | yments for services |
| Cash commissions paid | 8,000 | 0.00 | | Se | ecurity code 1 | Security code 2 | Security code 3 |
| Value of all securities distributed as compensation | | | Security codes | С | M S | W N T | |
| | ms of warrants, opti | ons or other rights | 200,000 finde | | | ble at \$0.05 for | a period of 2 |
| Other compensation ⁵ | | Describe | | | | | |
| Total compensation paic | I 8,000 | 0.00 | | | | | |
| Check box if the pers | on will or may receiv | we any deferred cor | npensation (desc | ribe the ter | rms below) | | |
| | | | | | | | |
| ⁴ <i>Provide the aggregate value of</i> <i>additional securities of the issue</i> <i>rights exercisable to acquire add</i> ⁵ <i>Do not include deferred compe</i> | r. Indicate the secur litional securities of | ity codes for all sec | | | | | |

| ITEM 9 - DIRECTORS, EXECU | TIVE OFFICERS | AND PROMOT | ERS OF THE ISS | SUER | | | | | | |
|--|------------------------|-----------------------|--------------------------|--|---------|----------|---|----|--|--|
| If the issuer is an investment fund | l, do not complete | Item 9. Procced to | Item 10. | | | | | | | |
| Indicate whether the issuer is any o | f the following (seled | t the one that appli | es - if more than one | e applies, select onl | y one). | | | | | |
| Reporting issuer in any juris | diction of Canada | | | | | | | | | |
| Foreign public issuer | | | | | | | | | | |
| Wholly owned subsidiary of a reporting issuer in any jurisdiction of Canada ⁶ | | | | | | | | | | |
| Provide nan | ne of reporting issue | ər | | | | | | | | |
| Wholly owned subsidiary of | a foreign public iss | uer ⁶ | | | | | | _ | | |
| Provide name of | foreign public issue | er | | | | | |] | | |
| Issuer distributing only eligi | ble foreign securitie | s and the distributio | n is to permitted clie | ents only ⁷ | | | | | | |
| If the issuer is at least one of the | above, do not com | plete Item 9(a) – (d | c). Proceed to Item | 10. | | | | | | |
| ⁶ An issuer is a wholly owned subsidiary of a reporting issuer or a foreign public issuer if all of the issuer's outstanding voting securities, other than securities that are required by law to be owned by its directors, are beneficially owned by the reporting issuer or the foreign public issuer, respectively. ⁷ Check this box if it applies to the current distribution even if the issuer made previous distributions of other types of securities to non-permitted clients. Refer to the definitions of "eligible foreign security" and "permitted client" in Part B(1) of the Instructions. | | | | | | | | | | |
| a) Directors, executive officer | s and promoters | of the issuer | | | | | | | | |
| Provide the following information for territory; otherwise state the country. | | | | | | tate the | province | or | | |
| Organization or company name | Family name | First given name | Secondary given names | non-individ resident jurisdictio | | | elationship to issuer select all that apply) | | | |
| | | | | 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 company name | Family name | | | | | | | | | |
| | | | | Province or country | D | | C |) | | |
| | | | | | | | | | | |
| c) Residential address of eac | h individual | | | | | | | | | |

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

ITEM 10 - CERTIFICATION

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

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

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

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

Securities legislation requires an issuer or underwriter that makes a distribution of securities under certain prospectus exemptions to file a completed report of exemt distribution.

By completing the information below, I certify, on behalf of the issuer/underwriter/investment fund manager, to the securities regulatory authority or regulator, as applicable, that I have reviewed this report and to my knowledge, having exercised reasonable diligence, the information provided in this report is true and, to the extent required, complete.

| Name of issuer/underwriter/ investment fund manager/agent | Potent Ventures Inc. | otent Ventures Inc. | | | | | | | | |
|--|---------------------------|---------------------|-----------------------------|-----------------------|----|---|--|--|--|--|
| Full legal name | Lamb | Charlie | | | | | | | | |
| | Family name | First given name | • | Secondary given names | | | | | | |
| Title | CEO, President & Director | | | | | | | | | |
| Telephone number | 2363172812 | Email address | charlie@potent-ventures.com | | | | | | | |
| Signature Charlie Lamb | | Date | 2021 | 10 | 18 | | | | | |
| | | | 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 | Fedele | Jessica | | | Title | Corporate Administration | |
|------------------|---------------------------|------------------|---------------|-----------------------|----------------------|-----------------------------|--|
| | Family name | First given name | Secondary | Secondary given names | | | |
| Name of company | Pacific Blue Holdings Lto | 1. | | | | | |
| Telephone number | 6042836110 | | Email address | jfedele.pbh@ | fedele.pbh@gmail.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 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.