# Form 45-106F1 Report of Exempt Distribution

BCSC EDER Reference Number 9369627

ITEM 1 - REPORT TYPE											
✓ New report											
Amended report	If ame	nded, pro	vide f	iling dat	e of I	report	that is I	being ame	ended		(YYYY-MM-DD)
ITEM 2 - PARTY CERTIF	YING THI	E REPOR	Г								
Indicate the party certifying th Instrument 81-106 Investment									estment fund	l, refer to sect	ion 1.1 of National
Investment fund i	ssuer										
✓ Issuer (other than	n an inves	stment fu	nd)								
			,								
ITEM 3 - ISSUER NAME											
Provide the following informat					invest	ment fu	ınd, abou	t the fund.			
	egal name	Oakley	Dakley Ventures Inc.								
Previous full le	Previous full legal name										
If the issuer's name changed in the last 12 months, provide most recent previous legal name.											
	Website	Website (if applicable)									
If the issuer has a legal entity i	dentifier, pr	ovide below	. Refer t	o Part B o	f the I	Instructio	ons for th	ne definition o	of "legal enti	ty identifier".	
Legal entity	identifier										
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.					2.						
Full legal name(s) of co-issuer(s)       (if applicable)											
ITEM 4 - UNDERWRITER	R INFORM	IATION									
If an underwriter is completing	the report,	provide the	underw	riter's full	legal	name a	nd firm N	NRD 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 o	office	contact	informati	ion of the un	derwriter.		
Street address											]
Municipality							Provi	nce/State			Ī
Country						Pos	tal 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 2 1 2 2 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 Ves If yes, provide SEDAR profile number 0 0 0 4 8 8 6 2
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.
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

If the issue is an investment fund, provide the following information:         a) Investment fund manager information         Full legal name						
Full legal name						
Firm NRD number (if applicable)   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   Province/State						
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 County Postal code/Zip code County Telephone number Postal code/Zip code Do Type of investment fund Type of investment fund Type of investment fund that most accurately identifies the issuer (select only one). Do Type of investment fund that most accurately identifies the issuer (select only one). Do Money market De Quity De County De C						
Street address   Municipality   Country   Postal code/Zip code   Telephone number   Website (if applicable) <b>b</b> Type of investment fund Type of investment fund that most accurately identifies the issuer (select only one). Alternative strategies Cryptoasset Other (describe) Indicate whether one or both of the following apply to the investment fund. Investment fund that most mestment fund issuers Is a UCITS Fund' Undertaking for the Collective Investment fund issuers Is a UCITS Fund' Undertaking for the Collective Investment of Transferable Securities funds (UCITS Funds) are investment funds regulated by the European Union (EU) directive and objective Investment fund issuers Is a UCITS Fund' Undertaking for the Collective Investment of Transferable Securities funds (UCITS Funds) are investment funds regulated by the European Union (EU) directive and objective Investment fund issuers Is a UCITS Fund' Undertaking for the Collective Investment of Transferable Securities funds (UCITS Funds) are investment funds regulated by the European Union (EU) directive Investment of Transferable Securities funds (UCITS Funds) are investment funds regulated by the European Union (EU) directive Investment fund issuers Is a UCITS Fund' Under the investment fund issuers Is a UCITS Fund' VYYY MM DD Is the investment fund a reporting issuer in any jurisdication of Canada? NO Yes If yes, select the jurisdictions of Canada in which the investment fund is a reporting issuer. NI NI NI ON Pe QC SK YI It the investment fund as a CUSIP number, provide below (first 6 digits only) CUSIP number It the investment fund is seukite the name of the exchange on which the investment fund's						
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CUSIP number						
name of an exchange and not a trading facility such as, for example, an automated trading system						
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 \$).						
L L \$\the under \$\mathbf{S}M \qquad L \qquad \mathbf{S}M \text{ to under \$\mathbf{S}M \qquad \text{ to under \$\mathbf{S}M \qquad \text{to under \$\mathbf{S}M						
\$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 juriso iction of Canada only. Do not include ir which must be disclosed in Item 8. The	n Item 7 securities issue	ed as payment of co	ommissions or fi	nder's fees in		
a) Currency							
Select the currency or currencies	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	✓ Canadian dollar US dollar Euro Other (describe)						
b) Distribution date(s)							
			uous basis, include				
	YYYY MM DD		YYYY N	IM DD			
c) Detailed purchaser info	rmation						
, .	s form for each purchaser and a	ttach the schedule	to the complete	ed report.			
d) Types of securities dist	•			•			
Provide the following information	n for all distributions reported on a per ISIP number, indicate the full 9-digit CL				ow to indicate the		
				Canadian \$	;		
Security CUSIP number (if applicable)							
U B S673697Each unit consists of one common share of the issuer and one share purchase warrant, with each warrant exercisable into one common share of the issuer at a price of \$0.50 per share for a period of 24 months.6,250,000.00 0.12000.1200750,000.00U B S673697Each unit consists of one common share of the issuer at a period of 24 months.6,250,000.000.1200750,000.00							
e) Details of rights and convertible/exchangeable securities							
	ns) were distributed, provide the exercis nversion ratio and describe any other te				exchangeable securities		
Convertible / exchangeable security code     Underlying security code     Exercise price (Canadian \$)     Expiry date (YYYY- MM-DD)     Conversion ratio     Describe other items (if applicable)					items (if applicable)		
W N T C M S							
f) Summary of the distribu	tion by jurisdiction and exemption						
purchaser resides and for each ex distribution in a jurisdiction of Co This table requires a separate line purchaser resides, if a purchaser jurisdiction.	securities distributed and the number of kemption relied on in Canada for that a anada, include distributions to purchase e item for: (i) each jurisdiction where a resides in a jurisdiction of Canada, and state the province or territory, otherwise	istribution. However, ij ers resident in that juris purchaser resides, (ii) e (iii) each exemption re	<sup>r</sup> an issuer located o adiction of Canada ach exemption reli	outside of Canad only. ed on in the juri	da completes a sdiction where a		
Province or	Exemption relied o	n	Number of unique <sup>28</sup>	Total a	mount (Canadian \$)		
Alberta	NI 45-106 2.3 [Accredited inv		purchasers	1	36,000.00		
Belgium	NI 45-106 2.3 [Accredited inv	-		1	6,000.00		
British Columbia	NI 45-106 2.5 [Family, friends associates]	_		5	78,000.00		

British Columbia	NI 45-106 2.3 [Accredited investor]	8	630,000.00
	750,000.00		
	Total number of unique purchasers <sup>2b</sup>	15	

<sup>2a</sup> In calculating the number of unique purchasers per row, count each purchaser only once. Joint purchasers may be counted as one purchaser.

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

#### g) Net proceeds to the investment fund by jurisdiction

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

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

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

## 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)

Provide information for each person (as defined in NI 45-106) to whom the issuer directly provides, or will provide, any compensation in connection of 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.  No Yes If yes, indicate number of person compensated is a registrant.  Indicate whether the person compensated is a registrant.  If the person compensated is an individual, provide the name of the individual.  Full legal name of individual provide the name of the individual.  Full legal name of individual, provide the name of the individual.  Full legal name of non-individual OG Management Ltd.  Firm NRD number	TEM 8 - COMPENSATIO	N INFORMATION					
No       Yes       If yes, indicate number of persons compensated.       1         a) Name of person compensated and registration status       No       Yes         Indicate whether the person compensated is a registrant.       No       Yes         If the person compensated is an individual, provide the name of the individual.       Yes         Full legal name of individual provide the following information.       Full legal name of non-individual       CG Management Ltd.         Firm NRD number	-						tion with
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 name of the individual.       Full legal name of individual provide the name of the individual.         Full legal name of individual provide the following information.       Full legal name of non-individual provide the following information.         Full legal name of non-individual provide the following information.       Full legal name of non-individual CG Management Ltd.         Firm NRD number	Indicate whether any compens	ation was paid, or will be p	aid, in connecti	on with the distribut	tion.		
Indicate whether the person compensated is a registrant.       No       Yes         If the person compensated is an individual, provide the name of the individual.       Full legal name of 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 [OG Management Ltd.       Firm NRD number       (if applicable)         Indicate whether the person compensated facilitated the distribution through a funding portal or an internet-based portal.       No       No </td <td>🗌 No 🗹 Yes</td> <td>If yes, indicate nur</td> <td>mber of perso</td> <td>ns compensated</td> <td>· 1</td> <td></td> <td></td>	🗌 No 🗹 Yes	If yes, indicate nur	mber of perso	ns compensated	· 1		
If the person compensated is an individual, provide the name of the individual.  Full legal name of individual provide the name of the individual.  Full legal name of individual, provide the following information.  Full legal name of non-individual OG Management Ltd.  Firm NRD number	a) Name of person comp	ensated and registratior	n status				
Full legal name of 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       OG Management Ltd.         Firm NRD number	Indicate whether the person cor	npensated is a registrant.		✓ No	Yes		
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       OG Management Ltd.         Firm NRD number	If the person compensated is an	individual, provide the nan	ne of the indivi	lual.			
If the person compensated is not an individual, provide the following information.  Full legal name of non-individual OG Management Ltd.  Firm NRD number	Full legal name of indiv	idual					
Full legal name of non-individual       OG Management Ltd.         Firm NRD number		Family r	name	First g	iven name	Secondary given name	es
Firm NRD number	If the person compensated is no	t an individual, provide the	following infor	mation.			
Indicate whether the person compensated facilitated the distribution through a funding portal or an internet-based portal.  No	Full legal name	of non-individual OG N	lanagement	_td.			
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       302-1650 Bayshore Dr         Municipality       Vancouver       Province/State       British Columbia         Country       Canada       Postal code/Zip code       V6G 3K2         Email address       Telephone number	Fi	rm NRD number			(if ap	oplicable)	
If a firm NRD number is not provided in Item 8 (a), provide the business contact information of the person being compensated. Street address 302-1650 Bayshore Dr Municipality Vancouver Province/State British Columbia Country Canada Postal code/Zip code V6G 3K2 Email address Telephone number 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) the instructions and the meaning of "control" in section 1.4 of NI 45-106 for the purposes of completing this section. Connect with the issuer or investment fund manager Insider of the issuer (other than an investment fund) Director or officer of the investment fund or investment fund manager Replayee of the issuer or investment fund or investment fund manager None of the above 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 servi 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, inter	Indicate whether the person cor	npensated facilitated the dis	stribution throu	gh a funding portal	or an internet-based	d portal. 🗹 No [	Yes
Street address       302-1650 Bayshore Dr         Municipality       Vancouver         Country       Canada         Postal code/Zip code       V6G 3K2         Email address       Telephone number         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) the Instructions and the meaning of "control" in section 1.4 of NI 45-106 for the purposes of completing this section.         Connect with the issuer or investment fund manager       Insider of the issuer or investment fund manager         Director or officer of the investment fund or investment fund manager       Employee of the issuer or investment fund manager         Image: None of the above       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 servici 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, inter	b) Business contact infor	mation					
Municipality       Vancouver       Province/State       British Columbia         Country       Canada       Postal code/Zip code       V6G 3K2         Email address       Telephone number			the business co	ntact information o	f the person being co	ompensated.	
Country       Canada       Postal code/Zip code       V6G 3K2         Email address       Telephone number       V6G 3K2         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) the Instructions and the meaning of "control" in section 1.4 of NI 45-106 for the purposes of completing this section.         Connect with the issuer or investment fund manager       Insider of the issuer (other than an investment fund)         Director or officer of the investment fund or investment fund manager       Employee of the issuer or investment fund manager         None of the above       VOG 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 service 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, interport on, in	Street address	302-1650 Bayshore Dr					
Email address       Telephone number         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) the Instructions and the meaning of "control" in section 1.4 of NI 45-106 for the purposes of completing this section.          Connect with the issuer or investment fund manager       Insider of the issuer (other than an investment fund)          Director or officer of the investment fund or investment fund manager       Employee of the issuer or investment fund manager          None of the above            O Compensation details	Municipality	Vancouver			Province/State	e British Columbia	
<ul> <li>c) Relationship to issuer or investment fund manager</li> <li>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) the Instructions and the meaning of "control" in section 1.4 of NI 45-106 for the purposes of completing this section.</li> <li>Connect with the issuer or investment fund manager</li> <li>Director or officer of the investment fund or investment fund manager</li> <li>Some of the above</li> <li>Compensation details</li> </ul> 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 service 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, interview.	Country	Canada		Pos	stal code/Zip code	e V6G 3K2	
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<ul> <li>Director or officer of the investment fund or investment fund manager</li> <li>Director or officer of the investment fund or investment fund manager</li> <li>None of the above</li> </ul> <b>d) Compensation details</b> 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 service 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, interview.							t B(2) of
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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 servic 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, inte	✓ None of the above						
Canadian dollars. Include cash commissions, securities-based compensation, gifts, discounts or other compensation. Do not report payments for service 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, inter-	d) Compensation details						
	Canadian dollars. Include cash c incidental to the distribution, sud allocation arrangements with th	ommissions, securities-base ch as clerical, printing, legal e directors, officers or emplo	ed compensatio or accounting	n, gifts, discounts or services. An issuer is	other compensation not required to ask	n. Do not report payments for	services
Cash commissions paid 34,650.00 Security code 1 Security code 2 Security code	Cash commissions pa	id 34,650.00			Security code 1	Security code 2 Security	code 3
Value of all securities distributed as compensation <sup>4</sup>		-	S	Security codes			
Describe terms of warrants, options or other rights	Describe to	erms of warrants, options o	or other rights				
Other compensation <sup>5</sup> Describe	Other compensation	n <sup>5</sup>	Describe				
Total compensation paid 34,650.00	Total compensation pa	id 34,650.00					]
Check box if the person will or may receive any deferred compensation (describe the terms below)	Check box if the pe	rson will or may receive an	y deferred con	pensation (describe	e the terms below)		
							]
	L	<b>, , , , , , , , ,</b>	-	,			]
<sup>4</sup> Provide the aggregate value of all securities distributed as compensation, <u>excluding</u> options, warrants or other rights exercisable to acquire additional securities of the issuer. Indicate the security codes for all securities distributed as compensation, <u>including</u> options, warrants or other rights exercisable to acquire additional securities of the issuer. <sup>5</sup> Do not include deferred compensation.	4 Dura vida Han are served at 1	a au cocurinoc dictributod a	is comnoncativ	n excluaina ontion	s warrants or other	rights exercisable to acquire	;

TEM 9 - DIRECTORS, EXECUTIVE OFFICERS AND PROMOTERS OF THE ISSUER								
If the issuer is an investment fund	l, do not complete l	tem 9. Procced to	Item 10.					
Indicate whether the issuer is any of the following (select the one that applies - if more than one applies, select only one).								
✓ Reporting issuer in any jurisdiction of Canada								
Foreign public issuer								
Wholly owned subsidiary of	a reporting issuer in	any jurisdiction of	Canada <sup>6</sup>					
Provide nan	ne of reporting issue	r						
Wholly owned subsidiary of a foreign public issuer <sup>6</sup>								
Provide name of foreign public issuer								
Issuer distributing only eligi	ole foreign securities	and the distributio	n is to permitted clie	nts only7				-
If the issuer is at least one of the	above, do not comp	olete Item 9(a) – (d	). Proceed to Item	10.				
<sup>6</sup> An issuer is a wholly owned subsidiary of a reporting issuer or a foreign public issuer if all of the issuer's outstanding voting securities, other than securities that are required by law to be owned by its directors, are beneficially owned by the reporting issuer or the foreign public issuer, respectively. <sup>7</sup> Check this box if it applies to the current distribution even if the issuer made previous distributions of other types of securities to non-permitted clients. Refer to the definitions of "eligible foreign security" and "permitted client" in Part B(1) of the Instructions.								
If the issuer is none of the above, check this box and complete Item 9(a) - (c).								
a) Directors, executive officers and promoters of the issuer								
Provide the following information for each director, executive officer and promoter of the issuer. For locations within Canada, state the province or territory; otherwise state the country. For "Relationship to issuer", "D" – Director, "O" – Executive Officer, "P" – Promoter.								
					ip to issuer 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	Residential jurisdiction of individual			to promo oth if appl	
				Province or country	D		С	,
c) Residential address of eac			· · · · · · ·					
	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	Oakley Ventures Inc.	Dakley Ventures Inc.					
Full legal name	Collick						
	Family name	First given name		Seconda	ary given na	ames	
Title	CEO						
Telephone number	7788682226	Email address	info@oakleyventures.com				
Signature	/s/ Glenn Collick	Date	2021	02	09		
			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	Little	Christopher		Title	President
	Family name	First given name	Secondary given name	es	
Name of company	Little Law Corporation				
Telephone number	6047700071	E	mail address chris@I	ittlelawcorp.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.