# Form 45-106F1 Report of Exempt Distribution

ITEM 1 - REPORT TYPE										
✓ New report										
Amended report If amended, provide filing date of report that is being amended (YYYY-MM-DD)										
ITEM 2 - PARTY CERTIFYING THE REPORT	Г									
Indicate the party certifying the report (select only one). Instrument 81-106 Investment Fund Continuous Disclosu	e). For guidance regarding whether an issuer is an investment fund, refer to section 1.1 of National									
☐ Investment fund issuer	osare and the companion policy to 141 01-100.									
✓ Issuer (other than an investment fund	nd)									
Underwriter	,									
ITEM 3 - ISSUER NAME AND OTHER IDENT										
Provide the following information about the issuer, or if the Full legal name Eat Beyon										
,	vond Global Holdings Inc.									
Previous full legal name										
If the issuer's name changed in the last 12 mont	onths, provide most recent previous legal name.									
Website (if applicable)										
If the issuer has a legal entity identifier, provide below. R	Refer to Part B of the Instructions for the definition of "legal entity identifier".									
Legal entity identifier										
If two or more issuers distributed a single security, provid	vide the full legal name(s) of the co-issuer(s) other than the issuer named above.									
Full legal name(s) of co-issuer(s)	(if applicable)									
ITEM 4 - UNDERWRITER INFORMATION										
If an underwriter is completing the report, provide the un	underwriter's full load name and firm NRD number									
Full legal name	underwriter's fait tegat name and firm NKD namber.									
Firm NRD number	(if applicable)									
Street address	provide the head office contact information of the underwriter.									
	Drawin on /Chata									
Municipality	Province/State									
Country	Postal code/Zip code									
Telephone number	Website (if applicable)									

ITEM 5 - ISSUER INFORMATION
If the issuer is an investment fund, do not complete Item 5. Proceed to Item 6.
a) Primary industry
Provide the issuer's North American Industry Classification Standard (NAICS) code (6 digits only) that in your reasonable judgment most closely corresponds to the issuer's primary business activity.
NAICS industry code 5 2 6 9 8 9
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
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 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
\$100M to under \$500M	☐ \$500M to under \$1B	\$1B or over

ITEM 6 - INVESTMENT	FUND ISSUER INFORMATION								
If the issuer is an inves	tment fund, provide the following information.								
a) Investment fund ma	anager information								
Full legal name									
Firm NRD number	(if applicable)								
If the investment fund mand	ager does not have a firm NRD number, provide the head office contact information of the investment fund manager.								
Street address									
Municipality	Province/State								
Country	Postal code/Zip code								
Telephone number	Website (if applicable)								
b) Type of investment	fund								
Type of investment fund tha	nt most accurately identifies the issuer (select only one) .								
Money market	☐ Equity ☐ Fixed income ☐ Balanced								
Alternative strateg	gies Cryptoasset Other (describe)								
Indicate whether one or bot	h of the following apply to the investment fund .								
Invests primarily in	n other investment fund issuers								
☐ Is a UCITs Fund¹									
<sup>1</sup> Undertaking for the Collec (EU) directives that allow c	tive Investment of Transferable Securities funds (UCITs Funds) are investment funds regulated by the European Union collective investment schemes to operate throughout the EU on a passport basis on authorization from one member state.								
c) Date of formation a	and financial year-end of the investment fund								
Date of forma	tion Financial year-end MM DD MM DD								
d) Reporting issuer st	atus of the investment fund								
Is the investment fund a rep	orting issuer in any jurisdication of Canada? No Yes								
If yes, select the jurisdictions	s of Canada in which the investment fund is a reporting issuer.								
☐ AII ☐	AB BC MB NB NL NT								
□ NS □	NU ON PE QC SK YT								
e) Public listing status	s of the investment fund								
If the investment fund has a	CUSIP number, provide below (first 6 digits only)								
	CUSIP number								
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 on an exchange and h									
-	AV) of the investment fund								
	investment fund as of the date of the most recent NAV calculation (Canadian \$).								
\$0 to under \$5M	s5M to under \$25M s25M to under \$100M								
\$100M to under \$500	DM \$500M to under \$1B \$1B or over Date of NAV calculation:  YYYY MM DD								

# If an issuer located outside of Canada completes a distribution in a jurisdiction of Canada, include in Item 7 and Schedule 1 information about purchasers resident in that jurisdiction of Canada only. Do not include in Item 7 securities issued as payment of commissions or finder's fees in connection with the distribution, which must be disclosed in Item 8. The information provided in Item 7 must reconcile with the information provided in Schedule 1 of the report. 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.

b) Distribution date(s)

✓ Canadian dollar

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.

Other (describe)

US dollar

End date 2020 08 12

YYYY MM DD

#### c) Detailed purchaser information

Complete Schedule 1 of this form for each purchaser and attach the schedule to the completed report.

Euro

## d) Types of securities distributed

Provide the following information for all distributions reported on a per security basis. Refer to Part A(12) of the Instructions for how to indicate the security code. If providing the CUSIP number, indicate the full 9-digit CUSIP number assigned to the security being distributed.

						Canadian \$	
Securi	ccurity CUSIP number (if applicable)		Description of security	Number of securities	Single or lowest Highest price		Total amount
WN	Т		Special Warrants will be deemed to be exercised without payment on the earlier of (a) the date that is four months and a day following the Closing Date, and (b) the third business day after the receipt is issued for a (final) prospectus.	3,362,640.00	0.5000		1,681,320.00

#### e) Details of rights and convertible/exchangeable securities

If any rights (e.g. warrants, options) were distributed, provide the exercise price and expiry date for each right. If any convertible/exchangeable securities were distributed, provide the conversion ratio and describe any other terms for each convertible/exchangeable security.

exch		Convertible / cchangeable ecurity code		Underlying security code						se price idian \$)	Expiry date (YYYY- MM-DD)	Conversion ratio	Describe other items (if applicable)
							Lowest	Highest					
,	W	Z	Т	С	М	S	0.0000				Each Special Warrant will entitle the holder thereof to receive one common share of the Issuer on the exercise or deemed exercise of each Special Warrant. Any Special Warrant exercised before the deemed exercise, will be subject to a hold period.		

### f) Summary of the distribution by jurisdiction and exemption

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 jurisdiction.

For jurisdictions within Canada, state the province or territory, otherwise state the country.

Province or country	Exemption relied on	Number of unique <sup>28</sup> purchasers	Total amount (Canadian \$)						
Alberta	NI 45-106 2.3 [Accredited investor]	3	11,000.00						
British Columbia	96	1,067,320.00							
British Columbia	NI 45-106 2.5 [Family, friends and business associates]	5	15,500.00						
Ontario	NI 45-106 2.3 [Accredited investor]	12	480,000.00						
Ontario	NI 45-106 2.5 [Family, friends and business associates]	1	10,000.00						
United States	NI 45-106 2.3 [Accredited investor]	3	32,500.00						
Virgin Islands, British	NI 45-106 2.3 [Accredited investor]	1	35,000.00						
Switzerland	30,000.00								
	Total dollar amount of securities distributed								

<sup>&</sup>lt;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.

# 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. 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>&</sup>lt;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)

<sup>&</sup>lt;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.

Provide information for each person (as defined in NI 45-106) to whom the issuer directly provides, or will provide, any compensation in connection with the distribution.  Complete additional copies of this page if more than one person was, or will be, compensated.  Indicate whether any compensation was paid, or will be paid, in connection with the distribution.  No V Yes If yes, indicate number of persons compensated.	ITEM 8 - COMPENSATION INFORMATION
No ✓ Yes If yes, indicate number of persons compensated.	Indicate whether any compensation was paid, or will be paid, in connection with the distribution.
	No ✓ Yes If yes, indicate number of persons compensated. 4

a) Name of person compensated and registration status												
Indicate whether the person co	mpensated is a regis	trant.	☐ No		$\checkmark$	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	Full legal name of non-individual Gravitas Securities Inc.											
Firm NRD number 2 6 2 6 0 (if applicable)												
Indicate whether the person compensated facilitated the distribution through a funding portal or an internet-based portal.												
b) Business contact info	rmation											
If a firm NRD number is not pr	ovided in Item 8 (a),	provide the business	contact info	rmation	of the	person b	peing com	pensated.				
Street address	505 Burrard Stree	et, Suite 1640										
Municipality	Vancouver				Р	rovince	e/State	British Columbia				
Country	Canada			P	ostal c	code/Zi	p code	V7X 1M6				
Email address	shughes@gravita	assecurities.com			Telep	hone n	umber	4163670999				
c) Relationship to issuer	or investment fun	d manager										
Indicate the person's relationsh the Instructions and the meani.  Connect with the issu	ng of "control" in sec	tion 1.4 of NI 45-10	-	poses of	comple	eting thi	s section.	ning of "connected" in Part B(2) of er than an investment fund)				
<u> </u>		-					,	·				
Director or officer of t	tne investment fund	or investment tund	nanager	Ш	⊨mpioy	ee or th	e issuer c	or investment fund manager				
✓ None of the above												
d) Compensation details												
Canadian dollars. Include cash	commissions, securit uch as clerical, printir	ies-based compensa ng, legal or accountir	tion, gifts, di ng services. A	scounts An issuei	or othei is not i	r compe required	nsation. D to ask for	ribution. Provide all amounts in to not report payments for services to details about, or report on, internal				
Cash commissions pa	aid 10,5	600.00				Security	code 1	Security code 2 Security code 3				
Value of all securition distributed as compensation			Security co	odes		C N	1 S	W N T				
Describe terms of warrants, options or other rights  Gravitas shall be entitled to 7% cash commission and 7% broker warrants commission of the aggregate cash proceeds received from sale of common shares. Total broker warrants distributed 21,000.												
Other compensation	on <sup>5</sup>	Describe	•									
Total compensation paid 10,500.00												
Check box if the pe	erson will or may rec	eive any deferred c	ompensatio	n (descr	ibe the	terms b	elow)					
<sup>4</sup> Provide the aggregate value additional securities of the iss rights exercisable to acquire a <sup>5</sup> Do not include deferred comp	uer. Indicate the sec additional securities o	curity codes for all se										

a) Name of person com	pensated and regis	tration s	status													
Indicate whether the person co	ompensated is a regist	rant.			☐ No		$\checkmark$	] Yes	6							
If the person compensated is a	n individual, provide t	he name	of the i	ndivid	lual.											
Full legal name of individual																
		Family nar	me			Firs	t given	name				Seco	ondary (	given na	ames	
If the person compensated is not an individual, provide the following information.																
Full legal name	e of non-individual	Mackie	Resea	arch (	Capital C	Corpora	ation									
F	Firm NRD number	3	0	7	0					(if app	olicab	ole)				
Indicate whether the person compensated facilitated the distribution through a funding portal or an internet-based portal.  V No Yes																
b) Business contact info	rmation															
If a firm NRD number is not pr	rovided in Item 8 (a), p	rovide th	e busin	ess co	ntact info	rmation	of the	perso	n bei	ing cor	mpen	sated.				
Street address	#1920-1075 W. G	eorgia S	Street													
Municipality	Vancouver						I	Provir	nce/s	State	Ві	ritish (	Colum	bia		
Country	Canada					P	Postal	code	/Zip	code	V	6E 3C	29			
Email address	vancouvercorpora van@mackieresea						Tele	phone	e nui	mber	77	78373	34100			
c) Relationship to issue	or investment fund	d manag	ger													
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.																
<u> </u>	Connect with the issuer or investment fund manager Insider of the issuer (other than an investment fund)															
Director or officer of	the investment fund of	or investn	nent fur	nd ma	nager	Ш	Emplo	yee of	the	issuer	or in	vestm	ent fun	d man	ager	
✓ None of the above																
d) Compensation details	3															
Provide details of all compensa Canadian dollars. Include cash incidental to the distribution, so allocation arrangements with t	commissions, securitions commissions, securitions clerical, printing	es-based g, legal oi	comper r accoui	nsation nting :	n, gifts, dis services. A	scounts In issuei	or other	er com requii	pens red to	ation. o ask fo	Do n	ot repo	ort payı	ments ;	for se	rvices
Cash commissions p	aid 31,73	32.40					[	Secu	rity co	ode 1	Sec	curity c	ode 2	Secu	rity co	de 3
Value of all securiti distributed as compensation	I			S	Security co	odes		С	М	S	W	N	Т			
Describe terms of warrants, options or other rights  Mackie shall be entitled to 7% cash commission and 7% broker warrants commission of the aggregate cash proceeds received from sale of common shares. Total broker warrants distributed 65,564.																
Other compensation	on <sup>5</sup>		Desc	ribe												
Total compensation p	aid 31,73	32.40														
Check box if the p	erson will or may rece	eive any o	deferre	d com	pensatior	n (descr	ribe the	e term	s bel	ow)						
<sup>4</sup> Provide the aggregate value additional securities of the iss rights exercisable to acquire a <sup>5</sup> Do not include deferred com	ruer. Indicate the secu additional securities o	ırity code	es for all													r

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								
	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 Canaccord Genuity Corp.								
F	Firm NRD number 9 0 0 (if applicable)							
Indicate whether the person compensated facilitated the distribution through a funding portal or an internet-based portal. Vo Ves								
b) Business contact info	rmation							
If a firm NRD number is not pr	rovided in Item 8 (a),	provide the business o	contact informatio	n of the pers	son being com	pensated.		
Street address	#2200-609 Gran	ville Street						
Municipality	Vancouver			Prov	vince/State	British Colum	bia	
Country	Canada		j	Postal cod	le/Zip code	V7Y 1H2		
Email address	kvoon@cgf.com			Telephor	ne number	6046437407		
c) Relationship to issuer	r or investment fur	id 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.  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 m	nanager	Employee	of the issuer o	r investment fun	d manager	
✓ None of the above			_				-	
_	<u>,                                      </u>							
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 p					curity code 1	Security code 2	Security code 3	
Value of all securiti distributed as compensation			Security codes	С	MS	WNT		
Describe terms of warrants, options or other rights  Canaccord shall be entitled to 7% broker warrants commission of the aggregate cash proceeds received from sale of common shares. Total broker warrants distributed 15,050.								
Other compensation	on <sup>5</sup>	Describe						
Total compensation paid								
Check box if the person will or may receive any deferred compensation (describe the terms below)								
<sup>4</sup> Provide the aggregate value additional securities of the iss rights exercisable to acquire a <sup>5</sup> Do not include deferred com	suer. Indicate the sec additional securities	curity codes for all sec						

a) Name of person comp	pensated and regi	stration stat	us						
Indicate whether the person co	mpensated is a regis	trant.		☐ No		<b>√</b>	Yes		
If the person compensated is an individual, provide the name of the individual.									
Full legal name of indiv	vidual								
		Family name			Firs	t given n	name	<u> </u>	Secondary given names
If the person compensated is not an individual, provide the following information.									
Full legal name of non-individual PI Financial Corp.									
Firm NRD number 5 2 9 0 (if applicable)									
Indicate whether the person co.	mpensated facilitate	d the distribut	tion throu	ıgh a fund	ing port	tal or ar	n interne	rt-based p	ortal.  Ves
b) Business contact info	rmation								
If a firm NRD number is not pro	ovided in Item 8 (a),	provide the b	usiness co	ontact info	rmation	of the	person b	peing com	pensated.
Street address	1900-666 Burrard	l Street							
Municipality	Vancouver					P	Province	e/State	British Columbia
Country	Canada				F	ostal o	code/Zi	p code	V6C 3N1
Email address	laurab@pifinanci	alcorp.com		j		Telep	hone n	umber	6046642764
c) Relationship to issuer	or investment fun	d manager		•					
the Instructions and the meaning	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.  Connect with the issuer or investment fund manager  Insider of the issuer (other than an investment fund)								
Director or officer of t	the investment fund	or investmen	t fund ma	anager	_	Employ	vee of th	e issuer o	or investment fund manager
✓ None of the above	and investment rand	or investmen	t idila ili	anagoi	Ц	Lilipioy	CC OI III	0 133001 0	or investment rand manager
_									
d) Compensation details		id to the per	on identi	ified in Iter	n 8(a) ii	n conna	ection wi	th the dist	tribution. Provide all amounts in
Canadian dollars. Include cash	commissions, securit Ich as clerical, printir	ies-based con 1g, legal or ac	npensatio counting	n, gifts, dis services. A	scounts In issuei	or othe r is not i	r compe required	nsation. D to ask for	on not report payments for services r details about, or report on, internal
Cash commissions pa	aid 3,5	00.00					Security	code 1	Security code 2 Security code 3
Value of all securitie distributed as compensation			5	Security co	odes		C N	1 S	W N T
Describe terms of warrants, options or other rights  PI Financial shall be entitled to 7% cash commission and 7% broker warrants commission of the aggregate cash proceeds received from sale of common shares. Total broker warrants distributed 7,000.									
Other compensation	on <sup>5</sup>	D	escribe						
Total compensation pa	aid 3,5	00.00							
Check box if the person will or may receive any deferred compensation (describe the terms below)									
<sup>4</sup> Provide the aggregate value additional securities of the issinghts exercisable to acquire a <sup>5</sup> Do not include deferred comp	uer. Indicate the sec additional securities (	urity codes fo							

TEM 9 - DIRECTORS, EXECU	TIVE OFFICERS	AND PROMOT	ERS OF THE ISSU	JER				
If the issuer is an investment fun	d, do not complete l	tem 9. Procced to	ltem 10.					
Indicate whether the issuer is any o	f the following (select	the one that applie	es - if more than one a	applies, select only one).				
Reporting issuer in any juris	sdiction of Canada							
Foreign public issuer								
Wholly owned subsidiary of	f a reporting issuer in	any jurisdiction of	Canada <sup>6</sup>					
Provide nar	me of reporting issue	r					7	
Wholly owned subsidiary of	f a foreign public issu	uer <sup>6</sup>					_	
Provide name o	f foreign public issue	r					7	
Issuer distributing only eligi	ble foreign securities	and the distribution	n is to permitted clien	ts only <sup>7</sup>			_	
If the issuer is at least one of the	ahove. do not comp	olete Item 9(a) – (c	). Proceed to Item 1	o.				
clients. Refer to the definitions of "e	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 issuer is none of the above, check this box and complete Item 9(a) - (c).							
a) Directors, executive officer	a) Directors, executive officers and promoters of the issuer							
Provide the following information fo territory; otherwise state the country					state the p	orovince	or	
Organization or company name	Business location of non-individual or residentail surjection of surjection of (select all that apply)							
				Province or country	D	0	Р	
	Kang	Ravinder		British Columbia	✓			
	Somjen	Alexander		Ontario	✓			
	Morris	Patrick		British Columbia	✓	✓		
	Robinson	Don		Ontario	✓			
b) Promoter information								
If the promoter listed above is not ar within Canada, state the province or								

Organization or company name	Family name	Secondary given name names	Residential jurisdiction of individual	Relationship to promoter (select one or both if applicable)		
				Province or country	D	0

# c) Residential address of each 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	Eat Beyond Global Holdings Inc.							
Full legal name	Kang							
	Family name	First given name		Second	dary given n	ames		
Title	Director							
Telephone number	6048386014	Email address	robkai	ng@telus.r	et			
Signature	Ds. Kenz	Date	202	08	19			
	Q		YYY	Y MM	DD	-		

ITEM 11- CONTACT F	PERSON				
		r the individual that the sect the individual certifying the		regulator m	ay contact with any questions
Same as individua	al certifying the report				
Full legal name				Title	
	Family name	First given name	Secondary given names		
Name of company					
Telephone number		Eı	mail address		

# 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.