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

ITEM 1 – REPORT TYPE									
TIEM I - REI ORT TITE									
✓ New report									
Amended report If amended, provide	d report If amended, provide Submission ID of report that is being amended: (Example: EDR1234567890-123								
ITEM 2 - PARTY CERTIFYING	THE REPORT								
Indicate the party certifying the report (see National Instrument 81-106 Investment F Issuer (Other than an investment fund Underwriter	Fund Continuous Disclosure and								
ITEM A LICOUED NAME AND G	THE DENTIFIED								
ITEM 3 – ISSUER NAME AND C	THER IDENTIFIERS								
Provide the following information about t	he issuer, or if the issuer is an i	investment fund, about the fund.							
Full legal name									
Plant Veda Foods Ltd.									
Previous full legal name If the issuer's na	ame changed in the last 12 mor	nths, provide most recent previous	egal name.						
Website (if applicable)									
website (ii applicable)									
If the issuer has a legal entity identifier, p	provide below Refer to Part B o	of the Instructions for the definition	of "legal entity identifier"						
Legal entity identifier	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		, logal chary localine.						
Did two or more co-issuers distribute a s	□ ingle security?								
	, — —	name (a) of the an increase(a) athereth	on the increase named above						
If two or more issuers distributed a single Full legal name(s) of co-issuer(s)	security, provide the full legal r	name(s) of the co-issuer(s) other th	an the issuer named above.						
ITEM 4 UNDERWRITER INCO	DMATION								
ITEM 4 – UNDERWRITER INFO	RWATION								
If an underwriter is completing the report	provide the underwriter's full le	gal name and firm NRD number.							
Full legal name									
Does the Underwriter's Firm have an NRI	Number? Firm NRD r	number							
If the underwriter does not have a firm N	RD number, provide the head of	ffice contact information of the unde	erwriter.						
Street address	Municipality	Province/State	Postal/ZIP code						
Country	Telephone number	Website (if applicable)							

ITEM 5 – ISSUER INFORMATION							
a) Primary industry							
	Provide the issuer's North American Industry Classification Standard (NAICS) code (6 digits only) that in your reasonable judgment most closely corresponds to the issuer's primary business activity.						
NAICS industry code							
413210							
	dicate the stage of operations. This does not apply to issuers nat best describes the issuer's stage of operations.	that provide services to issuers operating in					
• • •	all or substantially all of its assets in any of the following? If y rcial/business debt Consumer debt Private companies						
b) Number of employees							
✓0 - 49 □50 - 99 □100 - 499 □500 o	or more						
c) SEDAR profile number							
Does the issuer have a <u>SEDAR</u> profile? ☐ No ✓ Yes	screenshot of th	EDAR profile is a "private" profile, please provide a ne issuer's profile by e-mail to lings@osc.gov.on.ca					
d) Head office address	If the issuer does not	have a SEDAR profile, complete Item 5(d) – (h).					
Street address	Municipality Province/State	Postal/ZIP code					
Country	Telephone number						
e) Date of formation and financial year	r-end						
Date of formation	Financial year-end						
f) Reporting issuer status							
Is the issuer a reporting issuer in any juriso ☐ No ☐ Yes	diction of Canada?						
If yes, select the jurisdictions of Canada in							
AII AB BC MB	NB NL NT						
NS NU ON PE	∐QC ∐SK ∐YT						
g) Public listing status							
Does the issuer have a CUSIP number?	CUSIP number (provide first 6 digits only)						
· · · · · ·	name of the exchange on which the issuer's equity securities ps, for example, an automated trading system.	orimarily trade. Provide only the name of an					
Exchange name: Not Applicable Toro	onto Stock Exchange TSX Venture Exchange	Canadian Securities Exchange					
Aequitas Neo Exchange Australian Securities Exchange Deutsche Boerse Euronext							
London Stock Exchange	sdaq New York Stock Exchange	Shanghai Stock Exchange					
Shenzhen Stock Exchange Stoc	ck Exchange Of Hong Kong 🗌 Tokyo Stock Exchange	OTHER					
If other, describe:							
h) Size of issuer's assets							
financial statements for its first financial ye	ed on its most recently available annual financial statements (ear, provide the size of the issuer's assets at the distribution of						
	## Ito under \$25M						

ITEM 7 - INFORMATION ABOUT THE DISTRIBUTION

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) Currence	y
-------------	---

Select the currency or currencies in which the distribution was m	nade. All dollar amounts provided in the report must be in Canadian dollars.
✓ Canadian dollar US dollar Euro Other (describe):	

b) Distribution date(s)

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	End Date		
2021-03-19	2021-03-19		

c) Detailed purchaser information

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

Schedule1_Form45-105F1_10_05_2018 (Final).XLSX - 162 KB

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 \$		
Security code	CUSIP number	Number of securities	Single or lowest price	Highest price	Total amount	
SUB		3,540,900.0000	0.8500		3,009,765.0000	
Description of security: Subscription Receipts. Upon conversion of the subscription receipts, the holder will be entitled to a Unit consisting of a comm						

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.

Not Applicable

Convertible / exchangeable	Underlying security		e price dian \$)	Expiry date (YYYY-MM-DD)	Conversion ratio
security code	code	Lowest	Highest	(1111-WIWI-DD)	
UBS	WNT	2.5000	2.5000		
Describe other terms: Each whole warrant is exercisable into one share for a period of two y (if applicable) Warrants.					two years following the automatic exercise date of the Special

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 of Canada, state the province or territory, otherwise state country.

Exemption relied on	No. of unique purchasers ^{2a}	Total amount (Canadian \$)
NI 45-106 2.3 [Accredited investor]	408	2,315,485.0000
NI 45-106 2.5 [Family, friends and business associates]	45	196,350.0000
NI 45-106 2.3 [Accredited investor]	30	146,030.0000
NI 45-106 2.5 [Family, friends and business associates]	3	7,225.0000
NI 45-106 2.3 [Accredited investor]	38	230,690.0000
NI 45-106 2.5 [Family, friends and business associates]	5	23,035.0000
NI 45-106 2.3 [Accredited investor]	1	2,550.0000
NI 45-106 2.3 [Accredited investor]	1	5,100.0000
	NI 45-106 2.3 [Accredited investor] NI 45-106 2.5 [Family, friends and business associates] NI 45-106 2.3 [Accredited investor] NI 45-106 2.5 [Family, friends and business associates] NI 45-106 2.3 [Accredited investor] NI 45-106 2.5 [Family, friends and business associates] NI 45-106 2.3 [Accredited investor] NI 45-106 2.3 [Accredited investor]	NI 45-106 2.3 [Accredited investor] 408 NI 45-106 2.5 [Family, friends and business associates] 45 NI 45-106 2.3 [Accredited investor] 30 NI 45-106 2.5 [Family, friends and business associates] 3 NI 45-106 2.3 [Accredited investor] 38 NI 45-106 2.5 [Family, friends and business associates] 5 NI 45-106 2.3 [Accredited investor] 5 NI 45-106 2.3 [Accredited investor] 1

			-,
France	NI 45-106 2.3 [Accredited investor]	1	9,775.0000
Cayman Islands	NI 45-106 2.3 [Accredited investor]	1	5,100.0000
United Kingdom	NI 45-106 2.3 [Accredited investor]	1	3,400.0000
Panama	NI 45-106 2.3 [Accredited investor]	1	19,975.0000
Moldova, Republic of	NI 45-106 2.3 [Accredited investor]	1	10,200.0000
China	NI 45-106 2.3 [Accredited investor]	1	29,750.0000
Israel	NI 45-106 2.3 [Accredited investor]	1	5,100.0000
	3,009,765.0000		

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

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

ITEM 7 - INFORMATION ABOUT THE DISTRIBUTION

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

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

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

√ Not Applicable

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

ITEM 8 - COMPENSATIO	N INFORMATIO	N						
Provide information for each person (as defined in NI 45-106) to whom the issuer directly provides, or will provide, any compensation in connection with the distribution. Complete additional copies of this page if more than one person was, or will be, compensated.								
Indicate whether any compensate ☐ No ☑ Yes	ion was paid, or will	be paid, in connection	n with the dis	tribution.				
PERSON 1								
a) Name of person compensa	ted and registratio	n status						
Indicate whether the person com ☐ No ☑ Yes	pensated is a regist	rant.						
If the person compensated is an Family name	•	he full legal name of t en name		dary given names				
If the person compensated is not Full legal name of non-individual	an individual, provi	de the following inforn	nation.	Firm NRD number (if	annlicable)			
Mackie Research Capital Corpora	ation			3070	аррисавіс)			
Indicate whether the person com	pensated facilitated	the distribution through	gh a funding	ุ portal or an internet-ba	ased portal.			
✓ No ☐ Yes	'		, ,,,		,			
b) Business contact information	on							
If a firm NRD number is not prov	ided in Item 8(a), pr	ovide the business co	ontact inform	ation of the person bei	ing compensated.			
Street address	Municipa		Province/Sta	•	Postal/ZIP code			
Country	Telephor	ne number	Email addre	ss				
c) Relationship to issuer or in	vestment fund ma	nager						
Indicate the person's relationship Part B(2) of the Instructions and Connected with the issuer or i	the meaning of "cor	ntrol" in section 1.4 of	NI 45-106 fo		pleting this section	1.		
Insider of the issuer (other tha	n an investment fun	d)	✓ None	e of the above				
Director or officer of the invest	ment fund or investr	nent fund manager						
d) Compensation details								
Provide details of all compensati in Canadian dollars. Include casi for services incidental to the dist about, or report on, internal alloc	h commissions, sec tribution, such as cle	urities-based compen erical, printing, legal c	nsation, gifts, or accounting	discounts or other cor services. An issuer is	mpensation. Do not not required to asi	t report payments k for details		
✓ Cash commissions paid	207,523.0500							
Value of all securities	0.0000	Security code1 WN	T Sec	curity code2	Security code	3		
distributed as compensation ⁴		Describe terms of wa	arrants, option	ns or other rights				
·		182,283 Agent's Opt	ions, exercisa	able into one common	share at \$1.25 for	a period of 2 years		
☐ Other compensation ⁵		Describe						
Total compensation Paid	207,523.0500							
Check box if the person will o	or may receive any o	deferred compensation	n (describe th	ne terms below)				
	,		(======================================					

to acquire additional securities of the 5 Do not include deferred compensations.	ne issuer.	or all securiles distribute	a as compensation, including o	puons, warrants or other rights exercisable				
PERSON 2								
a) Name of person compensated	d and registration	on status						
Indicate whether the person compe								
If the person compensated is an individual, provide the full legal name of the individual. Family 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. Indicate whether the person compensated facilitated the distribution through a funding portal or an internet-based portal. V No Yes								
b) Business contact information								
If a firm NRD number is not provide Street address	ed in Item 8(a), pr Municip		ct information of the person bei vince/State	ng compensated. Postal/ZIP code				
Country	Telepho	ne number Em	ail address					
c) Relationship to issuer or inve	stment fund ma	nager						
Part B(2) of the Instructions and the Connected with the issuer or inverse Insider of the issuer (other than a Director or officer of the investment)	estment fund mar	nager d)	45-106 for the purposes of com, Employee of the issuer or in None of the above	_				
d) Compensation details								
•	commissions, sec ution, such as cle	urities-based compensat erical, printing, legal or ac	on, gifts, discounts or other con counting services. An issuer is					
Cash commissions paid								
Value of all securities distributed as compensation ⁴	distributed as							
Other compensation ⁵		Describe						
Total compensation Paid	0.0000							
Check box if the person will or r				per rights exercisable to acquire additional				
	e security codes f			ptions, warrants or other rights exercisable				

 $^{5}\,\mathrm{Do}$ not include deferred compensation.

⁴ Provide the aggregate value of all securities distributed as compensation, excluding options, warrants or other rights exercisable to acquire additional

⁵ Do not include deferred compen	sation.						
PERSON 3							
a) Name of person compensat	ed and registration	on status					
Indicate whether the person comp	pensated is a regis	trant.					
f the person compensated is an i	•	•					
amily name	First giv	en name	Sec	ondary given nai	mes		
the person compensated is not	an individual, prov	ide the following info	rmation.				
ull legal name of non-individual				Firm NRD nu	umber (if app	licable)	
laywood Securities Inc.				1630			
ndicate whether the person comp ✓ No ☐ Yes	pensated facilitated	d the distribution thro	ugh a fundii	ng portal or an in	nternet-based	l portal.	
b) Business contact information	on						
f a firm NRD number is not provi	ided in Item 8(a), p	rovide the business	contact info	rmation of the pe	erson being o	compensated.	
Street address	Municip	pality	Province/	State	Po	stal/ZIP code	
Country	Telepho	one number	Email add	Iress			
,							
c) Relationship to issuer or in							
Part B(2) of the Instructions and a Connected with the issuer or in Insider of the issuer (other than Director or officer of the investi	nvestment fund ma	nager nd)	E		ssuer or inves	stment fund man	ager
d) Compensation details							
Provide details of all compensation on Canadian dollars. Include cash for services incidental to the distra bout, or report on, internal alloca	n commissions, sec ribution, such as cl	curities-based compe lerical, printing, legal	ensation, gif or account	ts, discounts or ing services. An	other compe issuer is not	nsation. Do not i required to ask	report payments for details
Cash commissions paid							
Value of all securities	0.0000	Security code1 WI	NT :	Security code2		Security code3	
distributed as		Describe terms of v	varrants, op	ا tions or other rig	ıhts		
compensation ⁴		3,000 Agent's Option				at \$1.25 for a pe	eriod of 2 years
Other compensation ⁵		Describe					
Total compensation Paid	0.0000	J					
Check box if the person will o	r may receive any	deferred compensati	on (describe	the terms below	w)		
4 Provide the aggregate value of a securities of the issuer. Indicate to to acquire additional securities of 5 Do not include deferred compen	the security codes f the issuer.						

PERSON 4

Indicate whether the person compensated is a registrant. ☐ No ✓ Yes						
If the person compensated is an	individual, provide	the full legal name of	the individual.			
Family name	First giv	ven name	Second	dary given names		
If the person compensated is not Full legal name of non-individual	an individual, prov	ide the following infori	mation.	Firm NRD number (if	f annlicable)	
PI Financial Corp.						
Indicate whether the person com	pensated facilitated	d the distribution throu	ıgh a funding ı	oortal or an internet-ba	ased portal.	
✓ No Yes						
b) Business contact information	on					
If a firm NRD number is not prov	ided in Item 8(a), p	rovide the business c	ontact informa	ation of the person be	ing compensated.	
Street address	Municip	pality	Province/Sta	te	Postal/ZIP code	1
_						
Country	Telepho	one number	Email addres	SS		
						<u> </u>
c) Relationship to issuer or in	vestment fund ma	anager				
Indicate the person's relationship Part B(2) of the Instructions and Connected with the issuer or i	the meaning of "co	ntrol" in section 1.4 o	f NI 45-106 fo		pleting this section	n.
Insider of the issuer (other tha		· ·		of the above		
Director or officer of the invest		,	VIVOID	of the above		
d) Compensation details						
Provide details of all compensati						
in Canadian dollars. Include cast for services incidental to the dist						
about, or report on, internal alloc						
Cash commissions paid						
Value of all securities ✓ distributed as	0.0000	Security code1 WN	T Sec	curity code2	Security code	e3
distributed as compensation 4		Describe terms of w				
		3,000 Agent's Options, exercisable into one common share at \$1.25 for a period of 2 years				
Other compensation ⁵		Describe				
— Other compensation		Describe				
Total compensation Paid	0.0000					
Check box if the person will or may receive any deferred compensation (describe the terms below)						
⁴ Provide the aggregate value of all securities distributed as compensation, excluding options, warrants or other rights exercisable to acquire additional						
securities of the issuer. Indicate the security codes for all securities distributed as compensation, including options, warrants or other rights exercisable to acquire additional securities of the issuer.						
⁵ Do not include deferred compensation.						
PERSON 5						
a) Name of person compensated and registration status						
Indicate whether the person compensated is a registrant. □ No ☑ Yes						
If the person compensated is an individual, provide the full legal name of the individual.						

Secondary given names

Family name

First given name

Family name	First given name	Secondary given names				
If the person compensated is not an individual, provide the following information.						
Full legal name of non-individual Firm NRD number (if applicable)						
Raymond James Ltd.		8240				
Indicate whether the person compensated facilitated the distribution through a funding portal or an internet-based portal. Voc Yes						
b) Business contact information						
If a firm NPD number is not provided in Ite	m P(a) provide the hyginess o	antagt information of the person being	ng componented			
If a firm NRD number is not provided in Ite. Street address	. , .	Province/State	Postal/ZIP code			
Street address	Municipality	Flovince/State	FOSIAI/ZIF CODE			
_						
Country	Telephone number	Email address				
c) Relationship to issuer or investment	fund manager					
Indicate the person's relationship with the instructions and the meaning Connected with the issuer or investment	ng of "control" in section 1.4 of		pleting this section.			
Insider of the issuer (other than an invest	tment fund)	✓ None of the above				
Director or officer of the investment fund	or investment fund manager					
d) Compensation details						
Provide details of all compensation paid, o in Canadian dollars. Include cash commiss for services incidental to the distribution, s about, or report on, internal allocation arran	sions, securities-based comper uch as clerical, printing, legal (nsation, gifts, discounts or other com or accounting services. An issuer is	npensation. Do not report payments not required to ask for details			
Cash commissions paid						
Value of all securities	0.0000 Security code1 WN	T Security code2	Security code3			
distributed as compensation 4	Describe terms of w	arrants, options or other rights				
01 5						
Other compensation ⁵	Describe					
Total compensation Paid	0.0000					
Check box if the person will or may rec	eive any deferred compensatio	n (describe the terms below)				
⁴ Provide the aggregate value of all securities securities of the issuer. Indicate the securities acquire additional securities of the issue ⁵ Do not include deferred compensation.	ty codes for all securities distri					
·						
PERSON 6						
a) Name of person compensated and re	egistration status					
Indicate whether the person compensated ☐ No ✓ Yes	is a registrant.					
If the person compensated is an individual, provide the full legal name of the individual.						
Family name First given name Secondary given names						
If the person compensated is not an individ	ual provide the following infor	mation				
Full legal name of non-individual	aa., provide the following illion	Firm NRD number (if	applicable)			
till legal hame of non-individual						

Richardson Wealth Limited							
Indicate whether the person compensated facilitated the distribution through a funding portal or an internet-based portal. Ves							
b) Business contact information							
If a firm NRD number is not provided in Item	n 8(a), provide the bu	siness contact i	nformation of the pers	son being con	mpensated.		
Street address	Municipality	Provin	ce/State	Posta	al/ZIP code		
Country	Telephone number	Email	address				
a) Polationahin to inquer or investment	fund manager						
c) Relationship to issuer or investment							
Indicate the person's relationship with the is Part B(2) of the Instructions and the meaning							
Connected with the issuer or investment	fund manager		Employee of the issu	uer or investm	nent fund mar	nager	
Insider of the issuer (other than an invest	ment fund)	✓	None of the above				
Director or officer of the investment fund	or investment fund ma	nager					
d) Compensation details							
Provide details of all compensation paid, or in Canadian dollars. Include cash commiss for services incidental to the distribution, suabout, or report on, internal allocation arran	ions, securities-based Ich as clerical, printing	compensation, g, legal or acco	gifts, discounts or ot unting services. An is	ther compens ssuer is not re	ation. Do not equired to ask	report paymer for details	
Cash commissions paid							
Value of all securities distributed as	0.0000 Security cod		Security code2		Security code:	3	
compensation ⁴			options or other right		\$1.25 for a p	eriod of 2 year	rs
	g,see 7 igen.				Ψ=ο .ο. α ρ		
Other compensation ⁵	Describe						
T. ()	0.0000						
Total compensation Paid 0.0000							
Check box if the person will or may rece	Check box if the person will or may receive any deferred compensation (describe the terms below)						
⁴ Provide the aggregate value of all securities							
securities of the issuer. Indicate the security codes for all securities distributed as compensation, including options, warrants or other rights exercisable to acquire additional securities of the issuer.							
⁵ Do not include deferred compensation.							

TIEW 5 - D	RECTORS, EXECUTIVE OFFICER	S AND I ROMOTERO OF I	HE 1999ER				
Indicate whet	her the issuer is any of the following (select the	e one that applies - if more than one	e applies, select only one).				
Reporting	issuer in any jurisdiction of Canada						
☐ Foreign p	Foreign public issuer						
_	ned subsidiary of a reporting issuer in any juris	sdiction of Canada ⁶					
Provide na	ame of reporting issuer						
-	ned subsidiary of a foreign public issuer ⁶ ame of foreign public issuer						
Flovide II	arrie or foreign public issuel						
Issuer dis	tributing only eligible foreign securities and the	distribution is to permitted clients of	only ⁷				
	uer is at least one of the above, do not com						
	er is a wholly owned subsidiary of a reporting is						
	that are required by law to be owned by its dir nis box if it applies to the current distribution ev	•		•			
clients. R	efer to the definitions of "eligible foreign securi	ty" and "permitted client" in Part B(, 			
✓ If the isse	uer is none of the above, check this box an	d complete Item 9(a) – (c).					
a) Directors	, executive officers and promoters of the is	suer					
Provide the fo	ollowing information for each director, executive	officer and promoter of the issuer	For locations within Canada state	the province or			
	rwise state the country. For "Relationship to iss	•	•	The province of			
		Family name	Business location of	Relationship to			
Individual?	Organization or company name	First given name	non-individual or residential	issuer (select all that			
		Secondary given name	jurisdiction of individual	apply)			
✓Y □N		Sajnani	British Columbia	✓D ✓O □P			
		Mayur					
		Dipchand					
✓Y □N		Gurnani	British Columbia	□ D ☑ O □ P			
		Sunny					
		Rameshkumar					
✓Y □N		Smith	Ireland	✓ D □O □P			
		Claire					
✓Y □N		Balderson	British Columbia	✓D ✓O □P			
		Geoffrey					
✓Y □N		Yang	British Columbia	VD VO □P			
		Shengmin					
✓Y □N		Wong	British Columbia	√D O P			
		Aaron					
h) Promotor	· information		<u></u>				
b) Fromoter	mormation						
	er listed above is not an individual, provide the a, state the province or territory, otherwise state						
Within Canada	a, state the province of territory, etherwise state		Junioter, B. Birector, C. Exec	Relationship to			
	Organization or company name	Family name First given name Residential jurisdiction		promoter			
	, ,	Secondary given name	of individual	(select one or both if applicable)			
				□ D □ O			
				_			
			1				

c) Residential address of each individual

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

Plant Veda - Schedule 2 (March 19, 2021 closing).xlsx - 12 KB

ITEM 10 - CERTIFICATION

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

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

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

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

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

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

Name of issuer/underwriter/agent Plant V	nderwriter/agent Plant Veda Foods Ltd.				
Full legal name - Family name First given na		name	Secondary given names		
Gurnani					
Title		Telephone number	Email address		
Chief Executive Officer		604-200-3335 ext 104	sunny@plantveda.com		
Signature "Sunny Gurnani"		Date 2021-03-29			

ITEM 11 - CONTACT PERSON

Provide the following business contact information for the individual that the securities regulatory authority or regulator may contact with any questions regarding the contents of this report, if different than the individual certifying the report in Item 10.						
Same as individual certifying the report						
Full legal name - Family name	Secondary given names		Title			
Fast Brian				Solicitor		
Name of company	Telephone number	Emai	address			
Miller Thomson LLP	604-643-1238	bfast	@millerthomson.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 Schedule 1 or 2, that this information is being collected by the securities regulatory authority or regulator under the authority granted in securities legislation, that this information is being collected for the purposes of the administration and enforcement of the securities legislation of the local jurisdiction, and of the title, business address and business telephone number of the public official in the local jurisdiction, as set out in this form, who can answer questions about the security regulatory authority's or regulator's indirect collection of the information, and
- b) has authorized the indirect collection of the information by the securities regulatory authority or regulator.

EDR1617062045-750	2021-03-29 20:57:47.278
Submission ID	Date