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. 2024 05 10 (YYYY-MM-DD)

ITEM 2 – PARTY CERTIFYING THE REPORT

Indicate the party certifying the report (select only one). For guidance regarding whether an issuer is an investment fund, refer to section 1.1 of National Instrument 81-106 Investment Fund Continuous Disclosure and the companion policy to NI 81-106 (in Québec, Regulation 81-106 respecting Investment Fund Continuous Disclosure and Policy Statement to Regulation 81-106 respecting Investment Fund Continuous Disclosure and Policy Statement to Regulation 81-106 respecting Investment Fund Continuous Disclosure and Policy Statement to Regulation 81-106 respecting Investment Fund Continuous Disclosure and Policy Statement to Regulation 81-106 respecting Investment Fund Continuous Disclosure and Policy Statement to Regulation 81-106 respecting Investment Fund Continuous Disclosure and Policy Statement to Regulation 81-106 respecting Investment Fund Continuous Disclosure and Policy Statement to Regulation 81-106 respecting Investment Fund Continuous Disclosure and Policy Statement to Regulation 81-106 respecting Investment Fund Continuous Disclosure and Policy Statement Fund Continuous Disclosure).

Investment fund issuer

✓ Issuer (other than an investment fund)

Underwriter

ITEM 3 - ISSUER NAME AND OTHER IDENTIFIERS

Provide the following information about the issuer, or if the issuer is an investment fund, about the fund.

Full legal name	Mayo Lake Minerals Inc. / Mayo Lake Minerals Inc.	
Previous full legal name		
If the issuer's name changed in	the last 12 months, provide most recent previous legal name.	
Website	www.mayolakeminerals.com (if applicable)	
If the issuer has a legal entity identifier, p	provide below. Refer to Part B of the Instructions for the definition of "legal entity ide	entifier".
Legal entity identifier		
If two or more issuers distributed a single above.	e security, provide the full legal name(s) of the co-issuer(s) other than the issuer nam	ned
Full legal name(s) of co-issuer(s)	(if applicable)	

ITEM 4 – UNDERWRITER INFORMATION If an underwriter is completing the report, provide the underwriter's full legal name, firm NRD number, and SEDAR+ profile number. Full legal name Firm NRD number Firm NRD number SEDAR+ profile number

ITEM 5 – ISSUER INFORMATION

TEM 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 212220
If the issuer is in the mining industry , indicate the stage of operations. This does not apply to issuers that provide services to issuers operating in the mining industry. Select the category that best describes the issuer's stage of operations.
✓ Exploration ☐ Development ☐ Production Is the issuer's primary business to invest all or substantially all of its assets in any of the following? If yes, select all that apply.
🗌 Mortgages 🛛 Real estate 📄 Commercial/business debt 📄 Consumer debt 📄 Private companies
Cryptoassets
b) Number of employees
Number of employees: 🗹 0 - 49 🗌 50 - 99 🗌 100 - 499 🗌 500 or more
c) SEDAR+ profile number
Provide the issuer's SEDAR+ profile number
000052782

ITEM 6 – INVESTMENT FUND ISSUER INFORMATION									
If the issuer is an investment fund, provide the following information.									
a) Investment fund m	anager informatior	1							
Full legal name]					
Firm NRD number		(if app	licable)						
SEDAR+ profile number									
b) Type of investment	t fund								
Type of investment fund that mo	ost accurately identifies	the issuer (select only or	e).						
🗌 Money market	Equity	E Fixed incom	e 🗌 Balanced						
Alternative strategies	Cryptoasset	🗌 Other (descr	ibe)						

Indicate whether one or both of the following apply to the investment fund.									
Invest primarily in other investment fund issuers									
Is a UCITs Fund ¹									
	re Investment of Transferable Securities funds (UC				Jnion (EU) directives				
that allow collective investment schemes to operate throughout the EU on a passport basis on authorization from one member state.									
c) Net asset value (NAV) of the investment fund									
Select the NAV range of t	he investment fund as of the date of the n	nost recent NAV calcı	ılation (Canadio	an \$).					
Under \$5M	\$5M to under \$25M	Second se	er \$100M	Date of NAV	calculation:				
t tooM to updoe fe	$0.0M$ \Box $f = 0.0M$ to under $f = 1$ D	State \$1B or over							
S100M to under \$50 \$100M to under \$50	00M 🗌 \$500M to under \$1B			YYYY	MM DD				
ITEM 7 - INFORM	ATION ABOUT THE DISTRIBL	ΙΤΙΟΝ							
	ATION ABOUT THE DISTRIBU	JIION							
	de of Canada completes a distribution in	5							
	pasers resident in that jurisdiction of Canc fees, in connection with the distribution, v								
, , , , , , , , , , , , , , , , , , , ,	th the information provided in Schedule 1				<i>p</i>				
a) Currency									
Salact the currency or cu	rrencies in which the distribution was ma	ida All dollar amoun	ts provided in t	ha raport must	ha in Canadian				
dollars.	Tencies in which the distribution was ma	de. All dollar amount	is provided in tr	ie report must	be in Canadian				
🖌 Canadian dollar	🗌 US dollar 📄 Euro Other (d	describe)							
		, [
b) Distribution (dates								
b) Distribution (
	rt and end dates. If the report is being file								
	both the start and end dates. If the report I dates for the distribution period covered		unities distribue	a on a continu	ious dasis,				
Start date	2024 05 03	End date	2024	05 03					
Start uate	YYYY MM DD	Enduate	YYYY	MM DD					
c) Detailed purc	haser information								
Complete Schedule 1 oj	f this form for each purchaser and atto	ach the schedule to	the completed	l report.					
d) Types of secu	urities distributed								
Drevide the following inf			Defer to Dant A	(12) of the loot	wystiene fer bew				
	ormation for all distributions reported on ode. If providing the CUSIP number, indice								
distributed.				-					
				Canadian \$					
Security CUSIP		Number of	Single or	Highest					
code number (if applicable)	Description of security	securities	lowest price	price	Total amount				
UBS	Each Unit consists of one commo	6,906,400.0000	0.060	0 0.0600	414,384.0000				
		. ,							
-									

lf any rights (e.g. v convertible/excha	warrants, options	s) were dis es were dis	stributed,	hangeable securitie provide the exercise pri provide the conversion	ce and expiry date for		
Convertible/exchangeable security. Convertible / exchangeable security code Exercise price (Canadian \$) Expiry date (YYYY-MM- DD) Describe other terms (if applicable)							···· · · · · · · · · · · · · · · · · ·
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g) Net proceeds to the investment fund by jurisdiction

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

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

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

ITEM 8 – COMPENSATION INFORMATION

Provide information for each person (as defined in NI 45-106) (in Québec, Regulation 45-106 respecting Prospectus Exemptions) 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.							
	r will be paid, in connection with the distribution. of persons compensated.						
a) Name of person compensated a	nd registration status						
Indicate whether the person compensated is a re No Yes If the person compensated is an individual, prov	-						
Full legal name of individual							
_{Fa} اf the person compensated is not an individual, ا	mily name First given name Secondary given names or ovide the following information.						
Full legal name of non-individual							
Firm NRD number	(if applicable)						
Indicate whether the person compensated facilit	ated the distribution through a funding portal or an internet-based portal						
🗌 No 🔄 Yes							
b) Business contact information							
lf a firm NRD number is not provided in Item 8(c), provide the business contact information of the person being compensated.						
Street address							
Municipality	Province/State						
Country	Postal code/Zip code						
Email address	Telephone number						
c) Relationship to issuer or investn	nent fund manager						
Indicate the person's relationship with the issuer	or investment fund manager (select all that apply). Refer to the meaning of ne meaning of 'control' in section 1.4 of NI 45-106 (in Québec, Regulation 45-106						
Connected with the issuer or investment	fund manager						
Insider of the issuer (other than an invest							
Director or officer of the investment fund	-						
Employee of the issuer or investment fun	d 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 services incidental to the distribution, such as clerical, printing, legal or accounting services. An issuer is not required to ask for details about, or report on, internal allocation arrangements with the directors, officers or employees of a non-individual compensated by the issuer.

Cash commissions paid				
Value of all securities distributed as compensation ⁴				
Security codes	Security code 1	Security code 2	Security code 3	
Describe terms of warrants, options or other rights]
Other compensation ⁵				
Describe				
Total compensation paid				
Check box if the person will or may receive any def	erred compensati	on (describe the te	erms below)	
⁴ Provide the aggregate value of all securities distributed as acquire additional securities of the issuer. Indicate the secu options, warrants or other rights exercisable to acquire ad ⁵ Do not include deferred compensation.	urity codes for all s	ecurities distributed		

ITEM 9 – DIRECTORS, EXECUTIVE OFFICERS AND PROMOTERS OF THE ISSUER

Indicate whether the issuer is any of the following (select the one that applies – if more than one applies, select only one).

\checkmark	Reporting	issuer	in a	jurisdiction	of	Canada
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E Foreign public issuer

Wholly owned subsidiary of a reporting issuer in any jurisdiction of Canada ⁶

Provide name of reporting issuer

Wholly owned subsidiary of a foreign public issuer ⁶

Provide name of foreign public issuer

Issuer distributing only eligible foreign securities and the distribution is to permitted clients only ⁷.

If the issuer is at least one of the above, do not complete Item 9(a) - (c). Proceed to Item 10.

⁶ An issuer is a wholly owned subsidiary of a reporting issuer or a foreign public issuer if all of the issuer's outstanding voting securities, other than securities that are required by law to be owned by its directors, are beneficially owned by the reporting issuer or the foreign public issuer, respectively.

⁷ Check this box if it applies to the current distribution even if the issuer made previous distributions of other types of securities to non-permitted clients. Refer to the definitions of "eligible foreign security" and "permitted client" in Part B(1) of the Instructions.

□ If the 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.

Organization or company name	Family name	First given	Secondary given names	Business location of non-individual or residential jurisdiction of individual		Relationship to issuer (select all that apply)			
		name		Province or country	D	0	Р		

b) Promoter information

If the promoter listed above is not an individual, provide the following information for each director and executive officer of the promoter. For locations within Canada, state the province or territory, otherwise state the country. For "Relationship to promoter", "D" – Director, "O" – Executive Officer.

Organization or	Family	First given	Secondary given	Residential jurisdiction of individual		promoter (select if applicable)	
company name	name	name	names	Province or country	D O		
c) Residential a	ddress of	each indivi	dual				

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

securities regulatory aut	of exempt distribution. nation below, I certify, on beh hority or regulator, as applica igence, the information provic	ble, that I have r	eviewed this re	eport and to my knowledge, h	aving
Name of Issuer/ investment fund manager/agent	Mayo Lake Minerals Inc.]
Full legal name	MUNRO	Dar	rell	D]
	Family name	First give	en name	Secondary given names	_
Title	Corporate Administrator				
Telephone number	+1 (613) 836-2594	Email address	dmunro@may	yolakeminerals.com	
Signature	Darrell Munro	Date	2024 YYYY	05 16 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			
	Family name	First given name	Secondary given names
Title			
Name of company			
Telephone number		Email 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.

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.