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

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	FendX Technologies Inc. / FendX Tech	nologies Inc.
Previous full legal name		
If the issuer's name changed in	the last 12 months, provide most recent	previous legal name.
Website	www.fendxtech.com	(if applicable)
If the issuer has a legal entity identifier, p	rovide below. Refer to Part B of the Instr	uctions for the definition of "legal entity identifier".
Legal entity identifier		
If two or more issuers distributed a single above.	e security, provide the full legal name(s) c	of the co-issuer(s) other than the issuer named
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

TEWI 5 - ISSUER INFORMATION	
f 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 judgme nost closely corresponds to the issuer's primary business activity.	nt
NAICS industry code 000000	
f the issuer is in the mining industry , indicate the stage of operations. This does not apply to issuers that provide services to is perating in the mining industry. Select the category that best describes the issuer's stage of operations.	suers
Exploration Development Production S 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 compar	nies
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	
000054005	

ITEM 6 - INVESTMENT FUND ISSUER INFORMATION									
If the issuer is an investment fund, provide the following information.									
a) Investment fund m	anager information								
Full legal name									
Firm NRD number			(if applicable)						
SEDAR+ profile number]						
b) Type of investment	fund								
Type of investment fund that mo	st accurately identifies the	issuer (selec	t only one).						
🗌 Money market	Equity	🗌 Fixed	d income	Balanced					
Alternative strategies	Cryptoasset	🗌 Othe	er (describe)						

Indicate whether one or i	both of the following apply to the investm	ent fund.			
🗌 Invest primarily in d	ther investment fund issuers				
Is a UCITs Fund ¹					
	re Investment of Transferable Securities funds (UC				Union (EU) directives
that allow collective investme	nt schemes to operate throughout the EU on a pa	ssport basis on authoriza	tion from one mer	nber state.	
c) Net asset valu	ue (NAV) of the investment fund				
Select the NAV range of t	he investment fund as of the date of the r	nost recent NAV calcı	ulation (Canadi	an \$).	
Under \$5M	\$5M to under \$25M	\$25M to unde		Date of NAV	calculation:
			er \$100ivi		
🗌 \$100M to under \$5	00M 🗌 \$500M to under \$1B	🗌 \$1B or over		YYYY	MM DD
ITEM 7 - INFORM	ATION ABOUT THE DISTRIBL	ITION			
If an issuer located outsi	de of Canada completes a distribution in	a jurisdiction of Can	nda include in	Item 7 and Scl	hedule 1
	asers resident in that jurisdiction of Can				
	fees, in connection with the distribution, w		ed in Item 8. Th	ne informatior	n provided in
	th the information provided in Schedule 1	oj the report.			
a) Currency					
Select the currency or cu dollars.	rrencies in which the distribution was ma	de. All dollar amoun	ts provided in th	he report mus	t be in Canadian
🖌 Canadian dollar	US dollar 🗌 Euro Other (describe)			1
]
b) Distribution	dates				
	rt and end dates. If the report is being file				
	both the start and end dates. If the report		ırities distribue	d on a continu	ious basis,
include the start and end	l dates for the distribution period covered	i by the report.			
Start date	2024 02 02	End date	2024	02 02	
	YYYY MM DD		YYYY	MM DD	
c) Detailed pure	haser information				
	f this form for each purchaser and atta	ach the schedule to	the completed	l report.	
-	urities distributed		•	•	
, , , , , , , , , , , , , , , , , , , ,	ormation for all distributions reported on	, ,			
distributed.	ode. If providing the CUSIP number, indic	ate the juli 9-aigit CO	SIP HUITIDEL USS	igned to the s	ecurity being
		[Canadian \$	
CUSIP					
Security number (if	Description of security	Number of securities	Single or lowest price	Highest price	Total amount
applicable)			-	-	525 000 0000
UBS	Each unit consists of one commo	2,625,000.0000	0.200	U	525,000.0000

	n share warrant		e share p	ourchase					
e) Details	of rights and	convert	ible/exc	hangeable secur	ties				
				provide the exercise provide the conversi					
convertible/excha	-		stributeu,	provide the conversi	in rutio u	na describe any	other		each
Convertible /		Exercis	e price						
exchangeable	Underlying security code		dian \$)	Expiry date (YYYY- DD)	IM- Co	nversion ratio	De	scribe oth applic	ier terms (if
security code	security code	Lowest	Highest					applic	able)
WNT	CMS	0.4000		2027-02-02					
f) Summa	ry of the distr	ibution	by juriso	diction and exem	otion				
jurisdiction where located outside oj jurisdiction of Car This table require jurisdiction where Canada, if a purc	e a purchaser res f Canada comple nada only. s a separate line e a purchaser res	ides and f tes a distr item for: (ides, if a p	for each e ribution ir (i) each ju purchaser	and the number of p xemption relied on in a jurisdiction of Can risdiction where a pu resides in a jurisdict n.	Canada ada, inclu rchaser r	for that distribut ide distributions esides, (ii) each e	ton. H to pui	owever, if rchasers ro tion relied	an issuer esident in that on in the
For jurisdictions v	vithin Canada, st	ate the pr	ovince or	territory, otherwise s	ate the c	ountry.			
For jurisdictions v Province or country	vithin Canada, st		ovince or tion relie	-	Nu	ountry. mber of unique ourchasers ^{2a}		Total amo	ount (Canadian \$)
Province or	vithin Canada, st NI 45-106 2.	Exemp	tion relie	d on	Nu	nber of unique	3	Total amo	
Province or country	NI 45-106 2. ia NI 45-106 2.	Exemp 3 [Accre 3 [Accre	tion relie dited inv dited inv	d on restor] restor]	Nu	nber of unique		Total amo	\$)
Province or country Alberta	NI 45-106 2. ia NI 45-106 2.	Exemp 3 [Accre 3 [Accre	tion relie dited inv dited inv	d on restor]	Nu	nber of unique	3	Total amo	\$) 30,000.0000
Province or country Alberta British Columb	NI 45-106 2. ia NI 45-106 2. ia NI 45-106 2.	Exemp 3 [Accre 3 [Accre 5 [Family	tion relie dited inv dited inv y, friends	d on restor] restor] s and business	Nu	nber of unique	3	Total amo	\$) 30,000.0000 355,000.0000
Province or country Alberta British Columb British Columb	NI 45-106 2. ia NI 45-106 2. ia NI 45-106 2. associates]	Exemp 3 [Accre 3 [Accre 5 [Family 3 [Accre	tion relie dited inv dited inv y, friends dited inv	d on restor] restor] s and business restor]	Nu	nber of unique	3 11 1	Total amo	\$) 30,000.0000 355,000.0000 50,000.0000
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 ·····,
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

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	/ provides, or will	provide, any col	106) (in Québec, Regulat mpensation in connection ill be, compensated.				
Indicate whether any co □ No ☑ Yes		-	<i>paid, in connection with t</i> er of persons compensa	Г	ribution. 1		
a) Name of per	rson compensa	ated and regi	istration status				
Indicate whether the pe	rson compensated	l is a registrant.					
If the person compensa	ted is an individud	al, provide the n	ame of the individual.				
Full legal name of	individual						
lf the person compensa	ted is not an indiv	Family name idual, provide ti	First g he following information.	given nam •	e	Secondary give	en names
Full legal name of	f non-individual	Canaccord Ge	nuity Corp.				
Firi	m NRD number			(if app	licable)		
Indicate whether the pe	۱ rson compensated	d facilitated the	distribution through a fu	unding r	oortal or a	n internet-based r	oortal
√ No □ Yes	,	,		01		,	
	- + + :- 6 + :						
b) Business co	ntact informati	ION					
lf a firm NRD number is	not provided in It	em 8(a), provid	e the business contact inj	formati	on of the p	person being com	pensated.
Street address	2200 - 609 Gran	ville Street					
Municipality	Vancouver		Province	e/State	British C	olumbia	
Country	Canada		Postal code/Zip	o code	V7Y 1H2		
Email address	info@canaccorc	lgenuity.com	Telephone nu	umber	+1 (604)	643-7300	
c) Relationship	to issuer or in	vestment fur	nd manager				
Indicate the person's rel	ationship with the	e issuer or inves and the meani	tment fund manager (sel ng of 'control' in section '				
Connected with th			-				
Insider of the issue							
			stment fund manager				
Employee of the isNone of the above		ent rund mañag	sei				
d) Compensati	on 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	8000			
Value of all securities distributed as compensation ⁴	0			
Security codes	Security code 1	Security code 2	Security code 3	
	WNT			
Describe terms of warrants, options or other rights	210,000 Warrants until February 2, 2	s exercisable at a p 2027.	price of \$0.20	
	<u>_</u>			
Other compensation ⁵				
Describe				
Total compensation paid	8000			
Check box if the person will or may receive any def	erred compensatio	on (describe the te	rms below)	
⁴ Provide the aggregate value of all securities distributed as compensati securities of the issuer. Indicate the security codes for all securities dist acquire additional securities of the issuer.		0	,	
⁵ Do not include deferred compensation.				

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

If the issuer is an investment fund, do not complete Item 9. Proceed 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).

\checkmark	Reporting	issuer i	n a	jurisdiction	of Canada
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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		elationship 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			promoter (select if applicable)
company name	name	name names		Province or country	D	0
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	<i>of exempt distribution.</i> nation below, I certify, on beh hority or regulator, as applica igence, the information provi	ble, that I have r	eviewed this	report and to	my knowledge, having	7
Name of Issuer/ investment fund manager/agent	FENDX TECHNOLOGIES INC.					
Full legal name	MYERS	Care	olyn		Jane	
	Family name	First give	en name	Second	ary given names	
Title	CEO					
Telephone number	+1 (800) 344-9868	Email address	carolyn@fen	dxtech.com		
Signature	"Carolyn Myers"	Date	2024	02 07		
			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	LORI	McLellan	
	Family name	First given name	Secondary given names
Title	Securities Paralegal		
Name of company	CLARK WILSON LLP		
Telephone number		Email address Imclellan@cwilson.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.

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.