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 03 28 (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).
☐ 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 Technologies 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, provide below. 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, provide 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 underwriter's full legal name, firm NRD number, and SEDAR+ profile number.
Full legal name
Firm NRD number (if applicable)
SEDAR+ profile number

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 000000
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
000054005
ITEM 6 - INVESTMENT FUND ISSUER INFORMATION
If the issuer is an investment fund, provide the following information.
a) Investment fund manager information
Full legal name
Firm NRD number (if applicable)
SEDAR+ profile number
b) Type of investment fund
Type of investment fund that most accurately identifies the issuer (select only one).
☐ Money market ☐ Equity ☐ Fixed income ☐ Balanced
☐ Alternative strategies ☐ Cryptoasset ☐ Other (describe)

Indicate whether one or	both of the follow	ing apply to the invest	ment fund.						
☐ Invest primarily in o	☐ Invest primarily in other investment fund issuers								
☐ Is a UCITs Fund ¹	☐ Is a UCITs Fund ¹								
¹ Undertaking for the Collectiv	-			-	-	-	nion (E	U) directives	
that allow collective investmen	nt schemes to operate	throughout the EU on α ρ	passport basis on authorize	ation from one men	nber state.				
c) Net asset val	ue (NAV) of the	investment fund							
Select the NAV range of t	he investment fun	d as of the date of the	most recent NAV calc	ulation (Canadio	an \$).				
☐ Under \$5M		s5M to under \$25M	l 🔲 \$25M to und	er \$100M	Date of	NAV (calcula	ation:	
	0014	#E00N4++ d #4	D						
\$100M to under \$5	00M	\$500M to under \$1	B ☐ \$1B or over		YYYY	1	ММ	DD	
ITEM 7 – INFORM	ATION AROL	IT THE DISTRIE	RIITION						
IILIVI / - IINFORIVI	ATION ADOL	of the distric	OTION						
If an issuer located outsi information about purch									
commissions or finder's Item 7 must reconcile wi				sed in Item 8. Th	ne inform	nation	provia	led in	
		T provided in Schedule	Toj the report.						
a) Currency									
Select the currency or cudollars.	rrencies in which t	the distribution was m	nade. All dollar amoun	its provided in th	ne report	t must	be in (Canadian	
✓ Canadian dollar	US dollar	☐ Euro Other	(describe)						
b) Distribution	dates								
						.,		.,	
State the distribution sta the distribution date as l									
include the start and end					o. o o. o			5.5,	
Start date	2024	03 25	End date	2024	03	25			
		MM DD	2.10 0000	YYYY	MM	DD			
c) Detailed pure	shacor informs	ation							
c) Detailed purt	liasei illioillia	ILIOIT							
Complete Schedule 1 o	f this form for ea	ich purchaser and at	tach the schedule to	the completed	l report.				
d) Types of secu	urities distribut	ted							
Dunida tha fallavina inf	anno artico for all d	intuit utin an von outod .		Defeate Dant A	(12) - £ + 6	a laatu		a far barr	
Provide the following info to indicate the security of									
distributed.	37	,			0				
					Canadi	ian \$			
Security CUSIP			Number of	Single or	High	est			
code number (if	Descripti	ion of security	securities	lowest price	pri		Total	amount	

4,875,000.0000

0.2000

975,000.0000

applicable)

Units. Each unit consists of one co

UBS

	mmon share and one transferabl		
	e common share purchase warra		
	nt.		

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.

Convertible / exchangeable	Underlying security code		se price dian \$)	Expiry date (YYYY-MM- DD)	Conversion ratio	Describe other terms (if applicable)
security code	security code	Lowest	Highest	,		аррисавіе)
WNT	CMS	0.4000		2027-03-25		

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 purchasers ^{2a}	Total amount (Canadian \$)			
British Columbia	NI 45-106 2.3 [Accredited investor]	24	425,000.0000			
British Columbia	NI 45-106 2.5 [Family, friends and business associates]	1	10,000.0000			
Alberta	NI 45-106 2.3 [Accredited investor]	8	145,000.0000			
Newfoundland and Labrador	NI 45-106 2.3 [Accredited investor]	1	15,000.0000			
New Brunswick	NI 45-106 2.3 [Accredited investor]	2	200,000.0000			
Ontario	NI 45-106 2.3 [Accredited investor]	2	145,000.0000			
Ontario	Nl 45-106 2.5 [Family, friends and business associates]	1	10,000.0000			
United States of America	NI 45-106 2.5 [Family, friends and business associates]	1	25,000.0000			
	Total dollar amount of securities distributed					
	Total number of unique purchasers ^{2b}	40				

^{2a} 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

^{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.

jurisdiction where a purchaser resides. ³If 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. Indicate whether any compensation was paid, or will be paid, in connection with the distribution. If yes, indicate number of persons compensated. 3 ☐ No ✓ Yes 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./Corporation Canaccord Genuity Firm NRD number 900 (if applicable) 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 provided in Item 8(a), provide the business contact information of the person being compensated. Street address | 2200 - 609 Granville Street Municipality Vancouver Province/State British Columbia Country Canada Postal code/Zip code V7Y 1H2 Email address Telephone number c) Relationship to issuer or investment fund manager Indicate the person's relationship with the issuer or investment fund manager (select all that apply). Refer to the meaning of 'connected' in Part B(2) of the Instructions and the meaning of 'control' in section 1.4 of NI 45-106 (in Québec, Regulation 45-106 respecting Prospectus Exemptions) for the purposes of completing this section. Connected with the issuer or investment fund manager Insider of the issuer (other than an investment fund) Director or officer of the investment fund or investment fund manager ☐ Employee of the issuer or investment fund manager ✓ None of the above d) Compensation details

services. An issuer is not required to ask for details about, or employees of a non-individual compensated by the issu	•	al allocation arran	gements with the d	irectors, officers
Cash commissions paid	22000			
Value of all securities distributed as compensation ⁴	0			
Security codes	Security code 1	Security code 2	Security code 3	
	UBS	WNT		
	one common sha 25, 2027. 126,200 common share a warrant. Each wa	s. Each warrant is one at \$0.20 per shown in the control of \$0.40 per solution is exercisablet a price of \$0.40 per solution is exercisablet a price of \$0.40 per solution is exercisablet and control of \$0.40 per solution is exercised to the control of \$0.40 per solution is exercised to the control of \$0.40 per solution is exercised to the control of \$0.40 per solution is exercised to the control of \$0.40 per solution is exercised to the control of \$0.40 per solution is exercised to the control of \$0.40 per solution is exercised to the control of \$0.40 per solution is exercised to the control of \$0.40 per solution is exercised to the control of \$0.40 per solution is exercised to the control of \$0.40 per solution is exercised to the control of \$0.40 per solution is exercised to the control of \$0.40 per solution is exercised to \$0.40 per solution is ex	are until March onsists of one hare purchase e into one	
Describe terms of warrants, options or other rights	to acceleration, u	ntil March 25, 202	7.	
Other compensation ⁵				
Describe				
Total compensation paid	22000			
Check box if the person will or may receive any def	erred compensation	on (describe the te	erms below)	
⁴ Provide the aggregate value of all securities distributed as compensate securities of the issuer. Indicate the security codes for all securities distributed as compensation. ⁵ Do not include deferred compensation.		•	•	

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

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. Indicate whether any compensation was paid, or will be paid, in connection with the distribution. ☐ No If yes, indicate number of persons compensated. 3 ✓ Yes 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 Haywood Securities Inc. Firm NRD number (if applicable) 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 provided in Item 8(a), provide the business contact information of the person being compensated. Street address 700 - 200 Burrard Street Municipality Vancouver Province/State | British Columbia Country | Canada Postal code/Zip code V6C 3L6 Email address | kbella@haywood.com Telephone number | +1 (604) 697-7100 c) Relationship to issuer or investment fund manager Indicate the person's relationship with the issuer or investment fund manager (select all that apply). Refer to the meaning of 'connected' in Part B(2) of the Instructions and the meaning of 'control' in section 1.4 of NI 45-106 (in Québec, Regulation 45-106 respecting Prospectus Exemptions) for the purposes of completing this section. Connected with the issuer or investment fund manager Insider of the issuer (other than an investment fund) Director or officer of the investment fund or investment fund manager ☐ Employee of the issuer or investment fund manager ✓ None of the above d) Compensation details

Provide details of all compensation paid, or to be paid, to to Provide all amounts in Canadian dollars. Include cash come compensation. Do not report payments for services incident services. An issuer is not required to ask for details about, or employees of a non-individual compensated by the issue	missions, securities tal to the distributi or report on, intern	s-based compensati ion, such as clerical	ion, gifts, discounts , printing, legal or	s or other accounting
Cash commissions paid	6400			
Value of all securities distributed as compensation 4	0			_
Security codes	Security code 1	Security code 2	Security code 3	
Security codes	WNT]
Describe terms of warrants, options or other rights Other compensation ⁵ Describe	one common sha 25, 2027.	Each warrant is ex re at \$0.20 per sha		
Total compensation paid	6400			
Check box if the person will or may receive any defe	erred compensation	on (describe the te	rms below)	
⁴ Provide the aggregate value of all securities distributed as compensation securities of the issuer. Indicate the security codes for all securities distributed additional securities of the issuer. ⁵ Do not include deferred compensation.		_	•	

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. Indicate whether any compensation was paid, or will be paid, in connection with the distribution. ☐ No ✓ Yes If yes, indicate number of persons compensated. 3 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 Raymond James Ltd. Firm NRD number (if applicable) 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 provided in Item 8(a), provide the business contact information of the person being compensated. Street address | 400 - 925 West Georgia Street Municipality Vancouver Province/State British Columbia Country Canada Postal code/Zip code V6C 3L2 david.anderson@raymondja Email address mes.ca Telephone number +1 (604) 659-8000 c) Relationship to issuer or investment fund manager Indicate the person's relationship with the issuer or investment fund manager (select all that apply). Refer to the meaning of 'connected' in Part B(2) of the Instructions and the meaning of 'control' in section 1.4 of NI 45-106 (in Québec, Regulation 45-106 respecting Prospectus Exemptions) for the purposes of completing this section. ☐ Connected with the issuer or investment fund manager Insider of the issuer (other than an investment fund) $\hfill \square$ Director or officer of the investment fund or investment fund manager ☐ Employee of the issuer or investment fund manager ✓ None of the above

d) Compensation details				
Provide details of all compensation paid, or to be paid, to Provide all amounts in Canadian dollars. Include cash con compensation. Do not report payments for services incide services. An issuer is not required to ask for details about, or employees of a non-individual compensated by the issu	nmissions, securitie ntal to the distribut or report on, intern	s-based compensation, such as clerica	tion, gifts, discounts I, printing, legal or d	or other accounting
Cash commissions paid	4000			
Value of all securities distributed as compensation ⁴	0			
Security codes	Security code 1 WNT	Security code 2	Security code 3	
Describe terms of warrants, options or other rights	I	Each warrant is eare at \$0.20 per sh		
Other compensation ⁵				
Describe				
Total compensation paid	4000			
☐ 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 compensa securities of the issuer. Indicate the security codes for all securities dis acquire additional securities of the issuer.				
⁵ Do not include deferred compensation.				
ITEM 9 - DIRECTORS, EXECUTIVE OFFICE	RS AND PRO	MOTERS OF T	HE ISSUER	
If the issuer is an investment fund, do not complete It	em 9. Proceed to I	tem 10.		
Indicate whether the issuer is any of the following (select tl	he one that applies	– if more than one	applies, select only	one).
✓ Reporting issuer in a jurisdiction of Canada	, ,	,	, ,	,
☐ Foreign public issuer				
$\hfill \square$ Wholly owned subsidiary of a reporting issuer in an	າy jurisdiction of C	anada 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 ar	nd the distribution	is to permitted cli	ients only ⁷ .	
If the issuer is at least one of the above, do not comple	ete Item 9(a) – (c).	Proceed to Item 1	10.	

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.	⁷ Check this box if it applies to the current distribution even if the issuer made previous distributions of other types of sections.	ing issuer urities to
☐ If the issuer is none of the above, check this box and complete Item 9(a) – (c).		

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	P	

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		Secondary given names	Residential jurisdiction of individual	•	promoter (select if applicable)
company name	name	name		Province or country	D	О

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 requito file a completed report	ires an issuer or underwriter the of exempt distribution.	at makes a distrik	oution of secur	ities un	der certain prospectus exem	ptions			
securities regulatory aut	nation below, I certify, on beh hority or regulator, as applica igence, the information provic	ble, that I have r	eviewed this i	report a	and to my knowledge, havii	ng			
Name of Issuer/ investment fund manager/agent	ment fund FENDX TECHNOLOGIES INC.								
Full legal name	MYERS	Carolyn			Jane				
	Family name First given name Secondary given names				Secondary given names				
Title	CEO								
Telephone number	+1 (800) 344-9868 Email address		carolyn@fendxtech.com						
Signature	"Carolyn Myers"	Date	2024	04	03				
			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	lmclellan@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.