Form 45-106F1 Report of Exempt Distribution

BCSC EDER Reference Number 8705320

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 CERTIFY	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.											
Investment fund issuer											
✓ Issuer (other than	✓ Issuer (other than an investment fund)										
			,								
		-		_							
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.											
	jal name	Indroco	-								
Previous full leg	Previous full legal name Stratocom Solutions Corp.										
If the issuer's name changed in the last 12 months, provide most recent previous legal name.											
	Website	www.inc	drocor	p.com				(if applicabl	e)		
If the issuer has a legal entity ide	entifier <u>,</u> pro	vide below.	Refer t	to Part B of	the Ins	structio	ons for tl	he definition o	of "legal entit	ty identifier".	
Legal entity i	dentifier										
If two or more issuers distributed	d a single se	ecurity, prov	vide the	full legal r	name(s	;) of the	e co-issu	ver(s) other th	an the issuer	named above).
Full legal name(s) of co-	issuer(s)							(if applicable	e)		
	Turopu										
ITEM 4 - UNDERWRITER	INFORM	ATION									
If an underwriter is completing t	the report, p	rovide the	underw	riter's full l	egal no	ame ar	nd firm I	NRD number.			1
Full legal name				<u> </u>			1]
Firm NRD number							(if app	olicable)			
If the underwriter does not have	a firm NRE) number, p	orovide	the head of	ffice co	ontact i	informat	tion of the un	derwriter.		-
Street address					_						
Municipality							Provi	ince/State			
Country						Post	tal code	e/Zip code			
Telephone number]			Website			(if applicable)

ITEM 5 - ISSUER INFORMATION					
If the issuer is an investment fund, do not complete Item 5. Proceed to Item 6.					
a) Primary industry					
Provide the issuer's North American Industry Classification Standard (NAICS) code (6 digits only) that in your reasonable judgment most closely corresponds to the issuer's primary business activity.					
NAICS industry code 5 4 1 5 1 4					
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: Image: 0 - 49 50 - 99 100 - 499 500 or more					
c) SEDAR profile number					
Does the issuer have a SEDAR profile?					
No Ves If yes, provide SEDAR profile number 0 0 0 4 2 9 5 3					
If the issuer does not have SEDAR profile complete item 5(d) - (h).					
d) Head office address					
Street address Province/State					
Municipality Postal code/Zip code					
Country Telephone number					
e) Date of formation and financial year-end					
Date of formation					
f) Reporting issuer status					
Is the issuer a reporting issuer in any jurisdication of Canada? No Yes					
If yes, select the jurisdictions of Canada in which the issuer is a reporting issuer.					
AII AB BC MB NB NI NT					
NS NU ON PE QC SK YT					
g) Public listing status					
If the issuer has a CUSIP number, provide below (first 6 digits only)					
CUSIP number					
If the issuer is publicly listed, provide the name of the exchange on which the issuer's equity securities primarily trade. Provide only the name of an exchange and not a trading facility such as, for example, an automated trading system.					
Exchange name					
h) Size of issuer's assets					
Select the size of the issuer's assets based on its most recently available annual financial statements (Canadian \$). If the issuer has not prepared annual financial statements for its first financial year, provide the size of the issuer's assets at the distribution end date.					

\$0 to under \$5M	\$5M to under \$25M	□ \$25M to under \$100M
S100M to under \$500M	S500M to under \$1B	S1B or over

ITEM 6 - INVESTMENT	FUND ISSUER INFORMATION						
If the issuer is an inves	tment fund, provide the following information.						
a) Investment fund m	anager information						
Full legal name							
Firm NRD number	(if applicable)						
If the investment fund mane	ager does not have a firm NRD number, provide the head office contact information of the investment fund manager.						
Street address							
Municipality	Province/State						
Country	Postal code/Zip code						
Telephone number	Website (if applicable)						
b) Type of investment	fund						
Type of investment fund the	nt most accurately identifies the issuer (select only one) .						
Money market	Equity Fixed income Balanced						
Alternative strateg	jies Cryptoasset Other (describe)						
Indicate whether one or bot	h of the following apply to the investment fund .						
Invests primarily in	n other investment fund issuers						
Is a UCITs Fund ¹							
	tive Investment of Transferable Securities funds (UCITs Funds) are investment funds regulated by the European Union ollective investment schemes to operate throughout the EU on a passport basis on authorization from one member state.						
c) Date of formation a	nd financial year-end of the investment fund						
Date of forma	tion Financial year-end						
	YYYY MM DD MM DD						
d) Reporting issuer st	atus of the investment fund						
Is the investment fund a rep	orting issuer in any jurisdication of Canada? No Yes						
If yes, select the jurisdictions	s of Canada in which the investment fund is a reporting issuer.						
	AB BC MB NB NL NT						
	NU ON PE QC SK YT						
e) Public listing status	s of the investment fund						
If the investment fund has a	CUSIP number, provide below (first 6 digits only)						
	CUSIP number						
	If the investment fund is publicly listed, provide the name of the exchange on which the investment fund's securities primarily trade. Provide only the name of an exchange and not a trading facility such as, for example, an automated trading system.						
Exchange n							
f) Net asset value (NA	V) of the investment fund						
Select the NAV range of the	investment fund as of the date of the most recent NAV calculation (Canadian \$).						
\$0 to under \$5M	\$5M to under \$25M \$25M to under \$100M						
\$100M to under \$50	DM \$500M to under \$1B \$1B or over Date of NAV calculation:						
	YYYY MM DD						

ITEM 7 - INFORMATION ABOUT THE DISTRIBUTION

purchasers resident in that jurisdi	nada completes a distribution in a juris iction of Canada only. Do not include ii which must be disclosed in Item 8. The	n Item 7 securities issu	ed as payment of o	commissions or fi	inder's fees in				
a) Currency									
Select the currency or currencies in which the distribution was made. All dollar amounts provided in the report must be in Canadian dollars.									
✓ 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 da	^{ite} 2019 01 09	End da	^{ate} 2019	01 09					
	YYYY MM DD		YYYY	MM DD					
c) Detailed purchaser info	rmation								
Complete Schedule 1 of thi	s form for each purchaser and a	ttach the schedule	to the complet	ed report.					
d) Types of securities dist	ributed								
	n for all distributions reported on a per ISIP number, indicate the full 9-digit Cl				ow to indicate the				
		1		Canadian \$					
Security code CUSIP number (if applicable)	Description of security	Number of securities	Single or lowest price	Highest price	Total amount				
C M S Con	nmon Shares	755,000.0	0 1.0000		755,000.00				
e) Details of rights and convertible/exchangeable securities									
were distributed, provide the cor	ns) were distributed, provide the exercis aversion ratio and describe any other te				exchangeable securities				
Convertible / exchangeable Underlying security code security code	Exercise price (Canadian \$) Lowest Highest	Expiry date (YYYY- MM-DD)	Conversion ratio	Describe other	items (if applicable)				
f) Summary of the distribu	tion by jurisdiction and exemption		I						
 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 o	n	Number of unique purchasers	²⁹ Total a	mount (Canadian \$)				
Alberta	NI 45-106 2.3 [Accredited inv	estor]		10	460,000.00				
Alberta	NI 45-106 2.5 [Family, friends associates]	s and business		1	10,000.00				
British Columbia	NI 45-106 2.3 [Accredited inv	estor]		6	260,000.00				
British Columbia	NI 45-106 2.5 [Family, friends associates]	s and business		1	25,000.00				
	Tota	I dollar amount of se	curities distribut	ted	755,000.00				
	Total number of u	unique purchasers ^{2b}		18					
^{2a} In calculating the number of u	nique purchasers per row, count each p	ourchaser only once. Jo	pint purchasers ma	y 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.

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.

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

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

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

Description	Date of document or other material (YYYY-MM-DD)	Previously filed with or delivered to regulator? (Y/N)	Date previously filed or delivered (YYYY-MM-DD)	

ITEM 8 - COMPENSATION	INFORMATION				
Provide information for each person the distribution. Complete additi				-	y compensation in connection with e d.
Indicate whether any compensati	on was paid, or will be pa	id, in connecti	on with the distribu	tion.	
✓ No 🗌 Yes	If yes, indicate num	ber of perso	ns compensated	I.	
a) Name of person compen	sated and registration	status			
Indicate whether the person compe	ensated is a registrant.		No No	Yes	
If the person compensated is an in	dividual, provide the nam	e of the individ	lual.		
Full legal name of individu	la				
	Family na	ame	First g	given name	Secondary given names
If the person compensated is not a	n individual, provide the f	ollowing infori	mation.		
Full legal name of	non-individual				
Firm	NRD number			(if appli	cable)
Indicate whether the person compo	ensated facilitated the dist	tribution throu	gh a funding porta	l or an internet-based po	ortal. 🗌 No 🗌 Yes
b) Business contact informa					
If a firm NRD number is not provid	led in Item 8 (a), provide t	he business co	ntact information o	of the person being com	pensated.
Street address					
Municipality				Province/State	
Country			Po	stal code/Zip code	
Email address			-	Telephone number	
c) Relationship to issuer or	investment fund mana	iger			
Indicate the person's relationship v the Instructions and the meaning o					ning of "connected" in Part B(2) of
	or investment fund mana		· · ·		er than an investment fund)
Director or officer of the	investment fund or invest	ment fund ma	nager 🗌 E	mployee of the issuer o	r investment fund manager
None of the above					
d) Compensation details					
allocation arrangements with the a	nmissions, securities-based as clerical, printing, legal	compensation	n, gifts, discounts o services. An issuer i	r other compensation. D s not required to ask for	
Cash commissions paid				Security code 1	Security code 2 Security code 3
Value of all securities distributed as compensation ⁴		S	ecurity codes		
Describe tern	ns of warrants, options or	other rights			
Other compensation ⁵		Describe			
Total compensation paid					
Check box if the perso	on will or may receive any	deferred com	pensation (describ	e the terms below)	
4					
⁴ Provide the aggregate value of a additional securities of the issuer. rights exercisable to acquire addit ⁵ Do not include deferred compen- security of the security of	Indicate the security cod tional securities of the iss	les for all secu			

If the issuer is an investment fun	d, do not complete	Item 9. Procced to	ltem 10.				
Indicate whether the issuer is any c	of the following (selec	t the one that applie	es - if more than one a	applies, select only one).			
Reporting issuer in any juri	sdiction of Canada						
Foreign public issuer							
Wholly owned subsidiary o	f a reporting issuer i	n any jurisdiction of	Canada ⁶				
Provide nai	me of reporting issue	er					1
Wholly owned subsidiary o	f a foreign public iss	uer ⁶					
Provide name o	f foreign public issue	er]
Issuer distributing only elig	ible foreian securitie	s and the distributio	n is to permitted clien	ts only ⁷			
f the issuer is at least one of the	-		·	·			
Check this box if it applies to the clients. Refer to the definitions of "e If the issuer is none of the Directors, executive office	eligible foreign secur e above, check this l	ity" and "permitted c	client" in Part B(1) of the				
rovide the following information fo		itive officer and proi	tor, "O" – Executive O		Relatio	onship to	issue
Provide the following information fo erritory; otherwise state the country Organization or company name		itive officer and proi		fficer, "P" – Promoter. Business location of non-individual or	Relatio		issue
rovide the following information fo erritory; otherwise state the country	r. For "Relationship to	utive officer and pron b issuer", "D" – Direc	tor, "O" – Executive O Secondary given	fficer, "P" – Promoter. Business location of non-individual or residentail jurisdiction of	Relatio	onship to	issue
rovide the following information fo erritory; otherwise state the country	r. For "Relationship to	utive officer and pron b issuer", "D" – Direc	tor, "O" – Executive O Secondary given	fficer, "P" – Promoter. Business location of non-individual or residentail jurisdiction of individual	Relatio (selec	onship to t all that	issue apply
rovide the following information fo erritory; otherwise state the country	7. For "Relationship to	itive officer and prof issuer", "D" – Direc First given name	tor, "O" – Executive O Secondary given	fficer, "P" – Promoter. Business location of non-individual or residentail jurisdiction of individual Province or country	Relation (selection) D	onship to t all that	issue apply
rovide the following information fo erritory; otherwise state the country	 For "Relationship to Family name Miller 	itive officer and prof o issuer", "D" – Direct First given name Darren	tor, "O" – Executive O Secondary given	fficer, "P" – Promoter. Business location of non-individual or residentail jurisdiction of individual Province or country British Columbia	Relatio (select D ✓	onship to t all that	issue apply
rovide the following information fo erritory; otherwise state the country	 For "Relationship to Family name Miller Reese 	tive officer and prop issuer", "D" – Direct First given name Darren Philip	tor, "O" – Executive O Secondary given	fficer, "P" – Promoter. Business location of non-individual or residentail jurisdiction of individual Province or country British Columbia British Columbia	Relatio (select D ✓	onship to t all that O ✓	issue apply
rovide the following information fo erritory; otherwise state the country	 For "Relationship to Family name Miller Reese Vogler 	vitive officer and prof o issuer", "D" – Direct First given name Darren Philip Thomas	tor, "O" – Executive O Secondary given	fficer, "P" – Promoter. Business location of non-individual or residentail jurisdiction of individual Province or country British Columbia British Columbia	Relation (selection) ↓ ↓	onship to t all that O ✓	issue apply
rovide the following information fo prritory; otherwise state the country	 For "Relationship to Family name Miller Reese Vogler Bauer 	tive officer and prof o issuer", "D" – Direct First given name Darren Philip Thomas Dwayne	tor, "O" – Executive O Secondary given	fficer, "P" – Promoter. Business location of non-individual or residentail jurisdiction of individual Province or country British Columbia British Columbia British Columbia	Relation (selection) D V	onship to t all that O ✓	issue apply
rovide the following information fo erritory; otherwise state the country	 For "Relationship to Family name Miller Reese Vogler Bauer Nellis 	Itive officer and prof bissuer", "D" – Direct First given name Darren Philip Thomas Dwayne Thomas	stor, "O" – Executive O	fficer, "P" – Promoter. Business location of non-individual or residentail jurisdiction of individual Province or country British Columbia British Columbia British Columbia British Columbia	Relation (selection) D V	onship to t all that ✓	issue apply
rovide the following information fo erritory; otherwise state the country	 For "Relationship to Family name Miller Reese Vogler Bauer Nellis Blott 	Itive officer and prof o issuer", "D" – Direct First given name Darren Philip Thomas Dwayne Thomas Randall	stor, "O" – Executive O	fficer, "P" – Promoter. Business location of non-individual or residentail jurisdiction of individual Province or country British Columbia British Columbia British Columbia British Columbia	Relation (selection) D V	onship to t all that ✓ ✓	issue apply

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

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

ITEM 10 - CERTIFICATION

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

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

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

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

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

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

Name of issuer/underwriter/ investment fund manager/agent	ndrocorp Inc.						
Full legal name	Miller Darren						
	Family name	First given name	st given name			ames	
Title	Director	Director					
Telephone number	2508641300	Email address	dmiller@	ller@indrocorp.com			
Signature	"Darren Miller"	Date	2019	01	14		
			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	Nathanail	Maria			Title	Legal Counsel			
	Family name	First given name	Secondary	given names					
Name of company	McLeod Law LLP								
Telephone number	40322506417		Email address	mnathanail@	@mcleod	-law.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 Schedules 1 or 2, that this information is being collected by the securities regulatory authority or regulator under the authority granted in securities legislation, that this information is being collected for the purposes of the administration and enforcement of the securities legislation of the local jurisdiction, and of the title, business address and business telephone number of the public official in the local jurisdiction, as set out in this form, who can answer questions about the security regulatory authority's or regulator's indirect collection of the information, and
- b) has authorized the indirect collection of the information by the securities regulatory authority or regulator.