Form 45-106F1 Report of Exempt Distribution

BCSC EDER Reference Number 8657803

ITEM 1 - REPORT TYPE							
✓ New report							
☐ Amended report If amer	nded, provide filing date	of report that i	s being ame	ended	(YYYY-MM-DD)		
ITEM 2 - PARTY CERTIFYING THE REPORT							
Indicate the party certifying the report (seld Instrument 81-106 Investment Fund Conti				restment fund, refer to sect	ion 1.1 of National		
Investment fund issuer	radus Disclosure and the comp	umon policy to W	81-100.				
✓ Issuer (other than an inves	stment fund)						
Underwriter	and randy						
ITEM 3 - ISSUER NAME AND OT							
Provide the following information about the issuer, or if the issuer is an investment fund, about the fund.							
Full legal name Plaza Ventures Special Opportunity Investment Fund I LP							
Previous full legal name	Previous full legal name						
If the issuer's name changed in the	e last 12 months, provide most	recent previous le	gal name.				
Website	plaza.ventures		(if applicabl	e)			
If the issuer has a legal entity identifier, pro	ovide below. Refer to Part B of t	he Instructions for	the definition (of "legal entity identifier".			
Legal entity identifier							
If two or more issuers distributed a single s	ecurity, provide the full legal no	ame(s) of the co-is	suer(s) other th	an the issuer named above	2.		
Full legal name(s) of co-issuer(s)			(if applicable	e)			
ITEM 4 LINDEDWINTED INCOM	AATION						
ITEM 4 - UNDERWRITER INFORM							
If an underwriter is completing the report,	provide the underwriter's full le	gal name and firn	n NRD number.		٦		
Full legal name							
Firm NRD number		(if a	pplicable)				
If the underwriter does not have a firm NR.	If the underwriter does not have a firm NRD number, provide the head office contact information of the underwriter.						
Street address							
Municipality		Pro	ovince/State				
Country		Postal co	de/Zip code				
Telephone number			Website		(if applicable)		

If the Issuer's 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	Item 5 - Issuer Information
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	If the issuer is an investment fund, do not complete Item 5. Proceed to Item 6.
ANAICS industry code	a) Primary industry
If the issuer is in the mining industry, indicate the stage of operations. This does not apply to issuers that provide services to issuers aperating in the mining industry. Select the category that best describes the issuer's stage of operations. Exploration Development Production	
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 Does the issuer of employees	NAICS industry code 5 2 3 9 1 0
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	mining industry. Select the category that best describes the issuer's stage of operations.
Mortgages Real estate Commercial/business debt Consumer debt Private companies Cryptoassets	
Cryptoassets b) Number of employees Number of employees:	
Number of employees:	
c) SEDAR profile number Does the issuer have a SEDAR profile? No Yes If yes, provide SEDAR profile number 0 0 0 4 5 7 9 1 If the issuer does not have SEDAR profile complete item 5(d) - (h). d) Head office address Street address Municipality Country Postal code/Zip code Country Telephone number e) Date of formation and financial year-end Date of formation Financial year-end 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. All AB BC MB NB NB NL NT NS NU ON PE QC SK YT	b) Number of employees
Does the issuer have a SEDAR profile? No Yes If yes, provide SEDAR profile number 0 0 0 4 5 7 9 1 If the issuer does not have SEDAR profile complete item 5(d) - (h). d) Head office address Street address Municipality Country Postal code/Zip code Telephone number Date of formation and financial year-end Date of formation YYYY MM DD Financial year-end No Yes	Number of employees: ✓ 0 - 49 ☐ 50 - 99 ☐ 100 - 499 ☐ 500 or more
No ✓ Yes If yes, provide SEDAR profile number 0 0 0 4 5 7 9 1 If the issuer does not have SEDAR profile complete item 5(d) - (h). d) Head office address Street address Municipality Province/State Postal code/Zip code Postal code/Zip code <t< td=""><td>c) SEDAR profile number</td></t<>	c) SEDAR profile number
If the issuer does not have SEDAR profile complete item 5(d) - (h). d) Head office address Street address Province/State Postal code/Zip code Country Telephone number Date of formation and financial year-end Date of formation The postal code/Zip code Telephone number Pinancial year-end MM DD 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. All AB BC MB NB NB NL NT NS NU ON PE QC SK YT g) Public listing status	Does the issuer have a SEDAR profile?
Street address Province/State Postal code/Zip code Country Postal code/Zip code Postal code/Z	No ✓ Yes If yes, provide SEDAR profile number 0 0 0 4 5 7 9 1
Street address	
Municipality Postal code/Zip code Telephone number e) Date of formation and financial year-end Date of formation Financial year-end MM DD 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. All AB BC MB NB NB NL NT NS NU ON PE QC SK YT g) Public listing status	d) Head office address
Country Telephone number e) Date of formation and financial year-end Date of formation Financial year-end MM DD 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. All AB BC MB NB NI NI NT NS NU ON PE QC SK YT g) Public listing status	Street address Province/State
e) Date of formation and financial year-end Date of formation Financial year-end MM DD 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. All AB BC MB NB NL NT NS NU ON PE QC SK YT g) Public listing status	Municipality Postal code/Zip code
Date of formation	Country Telephone number
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. All AB BC MB NB NL NT NS NU ON PE QC SK YT g) Public listing status	e) Date of formation and financial year-end
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. All AB BC MB NB NL NT NS NU ON PE QC SK YT g) Public listing status	
If yes, select the jurisdictions of Canada in which the issuer is a reporting issuer. All AB BC MB NB NL NT NS NU ON PE QC SK YT g) Public listing status	f) Reporting issuer status
AII	Is the issuer a reporting issuer in any jurisdication of Canada? No Yes
NS NU ON PE QC SK YT g) Public listing status	If yes, select the jurisdictions of Canada in which the issuer is a reporting issuer.
g) Public listing status	AII AB BC MB NB NL NT
	NS NU ON PE QC SK YT
If the issuer has a CUSIP number, provide below (first 6 digits only)	g) Public listing status
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	Exchange name
h) Size of issuer's assets	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
\$100M to under \$500M	☐ \$500M to under \$1B	\$1B or over

ITEM 6 - INVESTMENT	ITEM 6 - INVESTMENT FUND ISSUER INFORMATION						
If the issuer is an inves	tment fund, provide the following information.						
a) Investment fund ma	anager information						
Full legal name							
Firm NRD number	(if applicable)						
If the investment fund mand	If the investment fund manager does not have a firm NRD number, provide the head office contact information of the investment fund manager.						
Street address							
Municipality	Province/State Province/State						
Country	Postal code/Zip code						
Telephone number	Website (if applicable)						
b) Type of investment	fund						
Type of investment fund tha	nt most accurately identifies the issuer (select only one) .						
Money market	☐ Equity ☐ Fixed income ☐ Balanced						
Alternative strateg	gies Cryptoasset Other (describe)						
	h of the following apply to the investment fund .						
	n other investment fund issuers						
☐ Is a UCITs Fund¹							
¹ Undertaking for the Collec (EU) directives that allow co	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 format	tion Financial year-end MM DD						
d) Reporting issuer st	atus of the investment fund						
Is the investment fund a rep	orting issuer in any jurisdication of Canada?						
If yes, select the jurisdictions	s of Canada in which the investment fund is a reporting issuer.						
AII	AB BC MB NB NL NT						
□ NS □	NU ON PE QC SK T						
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 name							
f) Net asset value (NA	AV) 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 \$500	DM S500M to under \$1B S1B or over Date of NAV calculation: YYYY MM DD						

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.

Select the currency or currencies in which the distribution was made. All dollar amounts provided in the report must be in Canadian dollars.

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 2018 10 29

End date 2018 10 29

c) Detailed purchaser information

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

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 \$		
	Secur		CUSIP number (if applicable)	Description of security	Number of securities	Single or lowest price	Highest price	Total amount
Γ	L P	U		Limited Partnership Untis	294,100.00	10.0000	10.0000	2,941,000.00

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 security code Underlying security code		Exercise price (Canadian \$)		Expiry date (YYYY- MM-DD)	Conversion ratio	Describe other items (if applicable)					
		Lowest	Highest								

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 ² purchasers	Total amount (Canadian \$)		
Alberta	NI 45-106 2.3 [Accredited investor]	1	85,500.00		
Ontario	NI 45-106 2.3 [Accredited investor]	24	2,600,500.00		
Québec	NI 45-106 2.3 [Accredited investor]	2	80,000.00		
Saskatchewan	NI 45-106 2.3 [Accredited investor]	2	125,000.00		
United States	NI 45-106 2.3 [Accredited investor]	1	50,000.00		
	Total dollar amount of securities distributed				
	Total number of unique purchasers ^{2b}				

^{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.

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. 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 (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 compensat	tion was paid, or will be p	oaid, in connecti	on with the distribution	n.				
No ✓ Yes	If yes, indicate nu	mber of perso	ons compensated.		4			
a) Name of person compe	a) Name of person compensated and registration status							
Indicate whether the person comp	Indicate whether the person compensated is a registrant. No V Yes							
If the person compensated is an i	If the person compensated is an individual, provide the name of the individual.							
Full legal name of individ	lual							
	Family	name	First giver	n name		Secondary (jiven names	
If the person compensated is not	an individual, provide the	e following infor	mation.					
Full legal name of	f non-individual Cana	accord Genuit	y Corp.					
Firr	m NRD number 9	0 0			(if app	licable)		
Indicate whether the person comp	pensated facilitated the d	istribution throu	gh a funding portal or	an interr	 net-based _l	portal.	No ✓	Yes
b) Business contact inform	ation							
If a firm NRD number is not provi	ided in Item 8 (a), provide	the business co	entact information of th	he person	being con	npensated.		
Street address								
Municipality				Provinc	ce/State			
Country			Postal code/Zip code					
Email address			Tele	ephone	number			
c) Relationship to issuer or	r investment fund mar	nager						
Indicate the person's relationship the Instructions and the meaning						aning of "connecte	d" in Part B(2	2) of
Connect with the issuer	or investment fund mar	nager	Inside	er of the	issuer (oth	ner than an invest	ment fund)	
Director or officer of the	e investment fund or inve	estment fund ma	nnager Empl	loyee of t	the issuer	or investment fun	d manager	
None of the above								
d) Compensation details								
Provide details of all compensation Canadian dollars. Include cash con incidental to the distribution, such allocation arrangements with the	mmissions, securities-bas as clerical, printing, lega	ed compensatio Il or accounting	n, gifts, discounts or oth services. An issuer is no	her comp ot require	ensation. I ed to ask fo	Do not report payı	ments for serv	vices
Cash commissions paid	5,750.00			Securit	ty code 1	Security code 2	Security code	e 3
Value of all securities distributed as compensation ⁴	1		Security codes					
Describe ter	rms of warrants, options	or other rights						
Other compensation ⁵		Describe						
Total compensation paid	5,750.00]						
Check box if the pers	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 compensatio	on, <u>excluding</u> options, v	warrants	or other ri	ghts exercisable t	o acquire	
additional securities of the issue rights exercisable to acquire add			ırities distributed as co	ompensa	tion, <u>includ</u>	<u>ding</u> options, warr	ants or other	

⁵Do not include deferred compensation.

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 individ	ual											
	F	amily name			First	given n	ame		Se	condary	given name	es
If the person compensated is not o	an individual, provi	de the following	g inforn	nation.								
Full legal name of non-individual GMP Securities L.P.												
Firm NRD number 2 1 9 8 0 (if applicable)												
Indicate whether the person compensated facilitated the distribution through a funding portal or an internet-based portal. No Ves												
b) Business contact information	ation											
If a firm NRD number is not provi	ded in Item 8 (a), p	rovide the busii	ness co	ntact infor	mation	of the	person l	peing co	mpensated	d.		
Street address												
Municipality						Р	rovince	e/State				
Country					Р	ostal c	code/Zi	p code				
Email address						Telep	hone r	umber				
c) Relationship to issuer or investment fund manager												
Indicate the person's relationship the Instructions and the meaning										connecte	ed" in Par	t B(2) of
Connect with the issuer			·	, ,			-		ther than a	an invest	ment fun	d)
Director or officer of the	investment fund o	r investment fu	ınd ma	nager		Employ	ee of th	e issue	r or investi	ment fun	d manag	er
✓ None of the above												
d) Compensation details												
Provide details of all compensation	•	•										
Canadian dollars. Include cash con incidental to the distribution, such												
allocation arrangements with the o											·	
Cash commissions paid	6,62	2.50					Security	code 1	Security	code 2	Security	code 3
Value of all securities			S	ecurity co	des							
distributed as compensation ⁴ Describe terms of warrants, options or other rights												
Other compensation ⁵ Total compensation paid	6.62		onbo									
Total compensation paid 6,622.50 Check box if the person will or may receive any deferred compensation (describe the terms below)												
Check box if the person	on will of may rece	ive any defend	ou com	Jensauon	(descri	De trie	terris t	elow)				
⁴ Provide the aggregate value of a additional securities of the issuer rights exercisable to acquire add. ⁵ Do not include deferred compen	r. Indicate the secu itional securities of	rity codes for a										

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 FIDELITY CLEARING CANADA ULC									
Firm NRD number 2 8 8 8 0 (if applicable)									
Indicate whether the person compensated facilitated the distribution through a funding portal or an internet-based portal. □ 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									
Municipality	Province/State								
Country	Postal code/Zip code								
Email address	Telephone number								
c) Relationship to issuer or investment fund manager									
Indicate the person's relationship with the issuer or investment fund ma the Instructions and the meaning of "control" in section 1.4 of NI 45-100	nager (select all that apply). Refer to the meaning of "connected" in Part B(2) of								
Connect 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	_								
<u> </u>	nanager Employee of the issuer or investment fund manager								
✓ None of the above									
d) Compensation details									
	ntified in Item 8(a) in connection with the distribution. Provide all amounts in ion, gifts, discounts or other compensation. Do not report payments for services								
incidental to the distribution, such as clerical, printing, legal or accounting	g 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 no	n-individual compensated by the issuer.								
Cash commissions paid 1,350.00	Security code 1 Security code 2 Security code 3								
Value of all securities	Security codes								
distributed as compensation ⁴ Describe terms of warrants, options or other rights									
Other compensation ⁵ Describe									
Total compensation paid 1,350.00									
Check box if the person will or may receive any deferred compensation (describe the terms below)									
	tion, <u>excluding</u> options, warrants or other rights exercisable to acquire curities distributed as compensation, <u>including</u> options, warrants or other								
rights exercisable to acquire additional securities of the issuer. ⁵ Do not include deferred compensation.									

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 8 2 4 0 (if applicable)									
Indicate whether the person compensated facilitated the distribution through a funding portal or an internet-based portal. □ No ✓ Yes									
b) Business contact information									
If a firm NRD number is not provided in	Item 8 (a), provide the business co	ontact information of the	person being co	ompensated.					
Street address									
Municipality		F	Province/State)					
Country		Postal	code/Zip code	,					
Email address		Telep	ohone number						
c) Relationship to issuer or inves	tment fund manager								
Indicate the person's relationship with the Instructions and the meaning of "cor					ed" in Part B(2) of				
Connect with the issuer or inve			•	". other than an invest	tment fund)				
<u></u>	ment fund or investment fund ma	_		er or investment fun					
_	nent fund of investment fund me	mager Emplo	yee of the issue	i or investment tun	u manager				
✓ None of the above									
d) Compensation details									
Provide details of all compensation paid, Canadian dollars. Include cash commission incidental to the distribution, such as cler	ons, securities-based compensatio ical, printing, legal or accounting	n, gifts, discounts or othe services. An issuer is not	er compensation required to ask	. Do not report payı	ments for services				
Cash commissions paid	3,600.00	inaiviauai compensaiea	by the issuer.						
· <u>L</u>	3,000.00		Security code 1	Security code 2	Security code 3				
Value of all securities distributed as compensation ⁴	\$	Security codes							
Describe terms of warrants, options or other rights									
Other compensation ⁵	Describe								
Total compensation paid	3,600.00								
Check box if the person will or may receive any deferred compensation (describe the terms below)									
⁴ Provide the aggregate value of all sect	urities distributed as compensatio	on, <u>exclud</u> ing options. wa	arrants or other	rights exercisable t	to acquire				
additional securities of the issuer. Indicarights exercisable to acquire additional Do not include deferred compensation	ate the security codes for all secu securities of the issuer.								

TEM 9 - DIRECTORS, EXECUTIVE OFFICERS AND PROMOTERS OF THE ISSUER									
If the issuer is an investment fun	d, do not complete	Item 9. Procced to	Item 10.						
Indicate whether the issuer is any o	f the following (selec	ct the one that appli	es - if more than one	e applies, select onl	y one).				
Reporting issuer in any juris	sdiction of Canada								
Foreign public issuer									
Wholly owned subsidiary of	a reporting issuer i	n any jurisdiction of	Canada ⁶						
Provide name of reporting issuer									
Wholly owned subsidiary of	a foreign public iss	uer ⁶						_	
Provide name of	f foreign public issue	er							
Issuer distributing only eligi	ble foreign securitie	s and the distribution	n is to permitted cli	ents only ⁷				_	
If the issuer is at least one of the	above, do not com	plete Item 9(a) – (d	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 officer	rs and promoters	of the issuer							
Provide the following information for territory; otherwise state the country	r each director, exec	utive officer and pro				state the _l	province	or	
Organization or company name Family name First given name Secondary given names Secondary given names First given name Secondary given names Secondary given names Secondary given names Secondary given names Individual Relationship to issuer (select all that apply)									
				Province or	country	D	0	Р	
	Richards	Rob		Ontario		✓			
	Brothman	Daniel		United States		✓			
	Leibowitz	Matthew		Ontario		✓			
	Israelsohn	Daniel		Ontario			✓		
b) Promoter information									
If the promoter listed above is not ar within Canada, state the province or									
Organization or company name	Family name	First given name	Secondary given names	Residential jurisdiction of individual		ationship one or bo			

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.

Province or

country

D

0

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	Plaza Ventures Special Opportunity Investment Fund I LP							
Full legal name	Thistlethwaite	Ashley						
	Family name	First given name	Secondary given names					
Title	Marketing Operations Manager							
Telephone number	4164812222	Email address as	hley@plaza.ventures					
Signature	Ashley Thistlethwaite	2018 11 16						
			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 individua	al certifying the report								
Full legal name	Israelsohn	Dan		Title	Manager/ Vice President				
	Family name	First given name	Secondary given names						
Name of company	Plaza Ventures								
Telephone number		Em	ail 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.

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.