Form 45-106F1 Report of Exempt Distribution

BCSC EDER Reference Number 8581399

ITEM 1 - REPORT TYPE									
☐ New report									
✓ Amended report If ame	nded, provide filing date	of report that i	s being ame	ended 2018 11 16	(YYYY-MM-DD)				
ITEM 2 - PARTY CERTIFYING TH	E REPORT								
Indicate the party certifying the report (sel Instrument 81-106 Investment Fund Conti				restment fund, refer to secti	on 1.1 of National				
☐ Investment fund issuer									
✓ Issuer (other than an investigation)	stment fund)								
Underwriter	,								
ITEM 3 - ISSUER NAME AND OT	HER IDENTIFIERS								
Provide the following information about the	he issuer, or if the issuer is an in	vestment fund, ab	out the fund.						
Full legal name	Plaza Ventures Specia	l Opportunity	Investment I	Fund I LP					
Previous full legal name									
If the issuer's name changed in th	e last 12 months, provide most	recent previous le	gal name.						
Website	plaza.ventures		(if applicable)						
If the issuer has a legal entity identifier. pr	ovide below. Refer to Part B of t	he Instructions for	r the definition (of "legal entity identifier".					
Legal entity identifier									
If two or more issuers distributed a single :	security, provide the full legal no	ame(s) of the co-is	suer(s) other th	an the issuer named above	<u>.</u>				
Full legal name(s) of co-issuer(s)			(if applicable	e)					
ITEM 4 - UNDERWRITER INFORM	MATION								
If an underwriter is completing the report,	provide the underwriter's full le	gal name and firn	n NRD number.						
Full legal name									
Firm NRD number	Firm NRD number (if applicable)								
If the underwriter does not have a firm NR	PD number, provide the head off	ice contact inform	nation of the un	derwriter.					
Street address]				
Municipality		Pro	ovince/State		1				
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 Country Telephone number Postal code/Zip code Financial year-end MM DD NM DD Financial year-end MM DD Financial year-end	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	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 FUND ISSUER INFORMATION								
If the issuer is an inves	tment fund, provide the following information.							
a) Investment fund manager information								
Full legal name								
Firm NRD number	(if applicable)							
If the investment fund mand	ager 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	e) Public listing status 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. 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) 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 End date 2018 80 07 2018 80 07 YYYY MM DD YYYY MM DD Detailed purchaser information Complete Schedule 1 of this form for each purchaser and attach the schedule to the completed report. 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 \$

e) Details of rights and convertible/exchangeable securities

Description of security

CUSIP number

(if applicable)

Security

code

PU

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.

Number of

securities

1,125,900.00

Single or

lowest

price

10.0000

Highest price

Total amount

11,259,000.00

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<u>a</u>} purchasers	Total amount (Canadian \$)
Alberta	NI 45-106 2.3 [Accredited investor]	28	2,690,000.00
British Columbia	NI 45-106 2.3 [Accredited investor]	2	175,000.00
United States	NI 45-106 2.3 [Accredited investor]	2	101,000.00
Ontario	NI 45-106 2.3 [Accredited investor]	50	6,893,000.00
Québec	NI 45-106 2.3 [Accredited investor]	7	1,250,000.00
Saskatchewan	NI 45-106 2.3 [Accredited investor]	3	150,000.00
	11,259,000.00		

^{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)

TEM 8 - COMPENSATION	Informatio	N								
	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	Indicate whether any compensation was paid, or will be paid, in connection with the distribution.									
No ✓ Yes	If yes, indica	te number of pers	ons compensated.	6						
a) Name of person comper	sated and regis	tration status								
Indicate whether the person comp	ensated is a registr	rant.	☐ No 🗸	Yes						
If the person compensated is an in	dividual, provide ti	he name of the indivi	dual.							
Full legal name of individual	ual									
	F	amily name	First given	name	Secondary	given names				
If the person compensated is not a	ın individual, provi	de the following info	mation.							
Full legal name of	non-individual	Canaccord Genui	ty Corp.							
Firm	n NRD number	9 0 0		(if ap	plicable)					
Indicate whether the person comp	ا ensated facilitated	the distribution thro	ugh a funding portal or c	an internet-based	l portal.	No ✓ Yes				
b) Business contact information	ation									
If a firm NRD number is not provid	ded in Item 8 (a), p	rovide the business c	ontact information of the	e person being co	mpensated.					
Street address										
Municipality				Province/State						
Country			Postal	code/Zip code						
Email address			Tele	phone number						
c) Relationship to issuer or	investment fund	l manager								
Indicate the person's relationship with the Instructions and the meaning						ed" in Part B(2) of				
Connect with the issuer	or investment fund	d manager	Inside	er of the issuer (o	ther than an inves	tment fund)				
Director or officer of the	investment fund o	r investment fund m	anager	oyee of the issue	r or investment fur	nd 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 o	nmissions, securitie as clerical, printing	rs-based compensation, legal or accounting	n, gifts, discounts or oth services. An issuer is no	er compensation. t required to ask ;	. Do not report pay	ments for services				
Cash commissions paid	5,83	37.50		Security code 1	Security code 2	Security code 3				
Value of all securities distributed as compensation ⁴			Security codes							
Describe terr	ns of warrants, op	tions or other rights								
Other compensation ⁵		Describe								
Total compensation paid	5,83	7.50								
Check box if the person	Check box if the person will or may receive any deferred compensation (describe the terms below)									
⁴ Provide the aggregate value of a	all securities distrib	outed as compensation	on, <u>excluding</u> options. w	varrants or other	rights exercisable	to acquire				
additional securities of the issuer rights exercisable to acquire additional securities of the issuer.	. Indicate the secu	rity codes for all sec	urities distributed as cor	mpensation, <u>inclu</u>	uding options, war	rants or other				

⁵Do not include deferred compensation.

a) Name of person compens	sated and registr	ration status										
Indicate whether the person compensated is a registrant. No Ves												
If the person compensated is an inc	lividual, provide the	e name of the	individ	ual.								
Full legal name of individu	al											
	Family name						ame		Se	condary	given nam	es
If the person compensated is not ar	n individual, provid	e the following	j inforn	nation.								
Full legal name of	non-individual	GMP Securit	ies L.F	P.								
Firm	NRD number	2 1	9	8	0			(if app	olicable)			
Indicate whether the person compe	nsated facilitated t	he distribution	throug	gh a fundii	ng port	al or an	interne	rt-based	portal.		No	✓ Yes
b) Business contact informa	tion											
If a firm NRD number is not provide	ed in Item 8 (a), pro	ovide the busir	ness coi	ntact infor	mation	of the	person l	peing co	mpensated	d.		
Street address												
Municipality						Р	rovince	e/State				
Country					Р	ostal c	ode/Zi	p code				
Email address						Telep	hone n	umber				
c) Relationship to issuer or investment fund manager												
Indicate the person's relationship w the Instructions and the meaning o										connecte	ed" in Par	rt B(2) of
Connect with the issuer of			,-			-	-		ther than a	an invest	ment fur	nd)
Director or officer of the i	nvestment fund or	investment fu	nd mai	nager		Employ	ee of th	e issuer	r or investr	ment fun	d manac	ıer
✓ None of the above						1 - 7						, -
d) Compensation details		,			06.11						.,	
Provide details of all compensation Canadian dollars. Include cash com- incidental to the distribution, such a	missions, securities	-based compe	nsation	, gifts, disc	counts o	or other	r compe	nsation.	Do not rep	port payı	ments for	services
allocation arrangements with the di											•	
Cash commissions paid	230,062	2.50					Security	code 1	Security	code 2	Security	code 3
Value of all securities distributed as compensation ⁴			S	ecurity co	des							
·	s of warrants, opti	ons or other ri	ights									
Other compensation ⁵		Desc	cribe									
Total compensation paid	230,062	2.50	l									
Check box if the person	n will or may receiv	ue any deferre	ed com	pensation	(descri	be the	terms b	elow)				
⁴ Provide the aggregate value of al additional securities of the issuer. rights exercisable to acquire addit.	Indicate the securi	ity codes for a										
⁵ Do not include deferred compens												

a) Name of person compensated and reg	istration status								
Indicate whether the person compensated is a registrant. No Yes									
If the person compensated is an individual, provide	e the name of the indivi	dual.							
Full legal name of individual									
	Family name	First giv	ven name	Secondary (given names				
If the person compensated is not an individual, pro	ovide the following infor	mation.							
Full legal name of non-individua	Haywood Securitie	es Inc.							
Firm NRD numbe	1 6 3	0	(if ap	plicable)					
Indicate whether the person compensated facilitat	ed the distribution throu	ıgh a funding portal o	or an internet-based	portal.	No ✓ Yes				
b) Business contact information	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	mpensated.					
Street address									
Municipality			Province/State						
Country		Pos	tal code/Zip code						
Email address		Te	elephone number						
c) Relationship to issuer or investment fu	nd manager	-							
Indicate the person's relationship with the issuer o the Instructions and the meaning of "control" in se					rd" in Part B(2) of				
Connect with the issuer or investment for		· · ·	ider of the issuer (o		ment fund)				
Director or officer of the investment fund		_	nployee of the issue						
_	of investment rand me		iployee of the issue	i or investment fun	d manager				
✓ None of the above									
d) Compensation details									
Provide details of all compensation paid, or to be p Canadian dollars. Include cash commissions, secun incidental to the distribution, such as clerical, print allocation arrangements with the directors, officers	ties-based compensations, legal or accounting	n, gifts, discounts or o services. An issuer is	other compensation. not required to ask ;	Do not report payı	ments for services				
	437.50								
Value of all securities			Security code 1	Security code 2	Security code 3				
distributed as compensation ⁴		Security codes							
Describe terms of warrants,	options or other rights								
Other compensation ⁵	Describe								
Total compensation paid 1,	437.50								
Check box if the person will or may re	ceive any deferred con	npensation (describe	the terms below)						
⁴ Provide the aggregate value of all securities dist	ributed as compensation	on, excludina options	, warrants or other	rights exercisable t	o acquire				
additional securities of the issuer. Indicate the se rights exercisable to acquire additional securities ⁵ Do not include deferred compensation.	curity codes for all sect								

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 i	dividual.								
Full legal name of individual									
Family name	First given name Secondar	ry given names							
If the person compensated is not an individual, provide the following information.									
Full legal name of non-individual Industrial Allia	nce Securities Inc.								
Firm NRD number 1 5 4 0 0 (if applicable)									
Indicate whether the person compensated facilitated the distribution	Indicate whether the person compensated facilitated the distribution through a funding portal or an internet-based portal. No Ves								
b) Business contact information									
If a firm NRD number is not provided in Item 8 (a), provide the busin	ss 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 the Instructions and the meaning of "control" in section 1.4 of NI 45-		cted" in Part B(2) of							
Connect with the issuer or investment fund manager	Insider of the issuer (other than an inve	estment fund)							
<u> </u>	<u></u>								
Director or officer of the investment fund or investment fur	d manager	und manager							
✓ None of the above									
d) Compensation details									
Provide details of all compensation paid, or to be paid, to the person									
Canadian dollars. Include cash commissions, securities-based comper incidental to the distribution, such as clerical, printing, legal or account									
allocation arrangements with the directors, officers or employees of a									
Cash commissions paid 37,312.50	Security code 1 Security code 2	2 Security code 3							
Value of all securities	Security codes								
distributed as compensation ⁴									
Describe terms of warrants, options or other rig									
Other compensation ⁵ Desc	be								
Total compensation paid 37,312.50									
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 comper	sation, excluding options, warrants or other rights exercisable	e to acquire							
additional securities of the issuer. Indicate the security codes for al rights exercisable to acquire additional securities of the issuer.									
⁵ Do not include deferred compensation.									

a) Name of person compensated and registration status	6							
Indicate whether the person compensated is a registrant.		No	\checkmark	Yes				
If the person compensated is an individual, provide the name of the	e individual.							
Full legal name of individual								
Family name		First	given na	ame	Sec	ondary gi	ven names	
If the person compensated is not an individual, provide the following	ng informatio	on.						
Full legal name of non-individual Pinnacle Co	rresponde	nt Services	, a divi	sion of Can	accord Geni	uity Co	rp.	
Firm NRD number 3 1 7 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 bus	iness contact	t information	of the p	person being	compensated.			
Street address								
Municipality			Р	rovince/Sta	te			
Country		Р	ostal c	ode/Zip cod	de			
Email address			Telepl	hone numb	er			
c) Relationship to issuer or investment fund manager								
Indicate the person's relationship with the issuer or investment fun						onnected	d" in Part B(2) of	
the Instructions and the meaning of "control" in section 1.4 of NI 4.	5-106 for the	· ·	•	_				
Connect with the issuer or investment fund manager			insider (of the Issuer	(other than ar	ınvestr	nent tuna)	
Director or officer of the investment fund or investment f	und manage	er 🔲 I	Employ	ee of the iss	uer or investm	ent func	l manager	
✓ None of the above								
d) Compensation details								
Provide details of all compensation paid, or to be paid, to the person								
Canadian dollars. Include cash commissions, securities-based comp incidental to the distribution, such as clerical, printing, legal or acco								
allocation arrangements with the directors, officers or employees of	a non-indivi	idual comper	nsated b	y the issuer.				
Cash commissions paid 2,875.00				Security code	1 Security c	ode 2	Security code 3	
Value of all securities	Secur	ity codes						
distributed as compensation ⁴	righto							
Describe terms of warrants, options or other								
	scribe							
Total compensation paid 2,875.00								
Check box if the person will or may receive any deferr	ed compens	sation (descri	ibe the t	terms below)				
⁴ Provide the aggregate value of all securities distributed as comp	ensation, ex	cluding optic	ons, wai	rrants or othe	er rights exerc	isable to	acquire	
additional securities of the issuer. Indicate the security codes for rights exercisable to acquire additional securities of the issuer.								
⁵ Do not include deferred compensation.								

a) Name of person compensat	ted and registrat	tion status							
Indicate whether the person compens	ated is a registrant	:	☐ No	\checkmark	Yes				
If the person compensated is an indivi	idual, provide the r	name of the indiv	idual.						
Full legal name of individual									
	Fam	ily name		First given n	name		Secondary	given names	
If the person compensated is not an individual, provide the following information.									
Full legal name of no	n-individual Ra	mond James L	td.						
Firm NRD number 8 2 4 0 (if applicable)									
Indicate whether the person compense	Indicate whether the person compensated facilitated the distribution through a funding portal or an internet-based portal. No Ves								
b) Business contact information	n								
If a firm NRD number is not provided	in Item 8 (a), prov	ide the business c	ontact inform	nation of the	person be	ing con	npensated.		
Street address									
Municipality				F	Province/	State			
Country			1	Postal o	code/Zip	code			
Email address			Ī	Telep	hone nu	mber			
c) Relationship to issuer or inv	estment fund m	anager							
Indicate the person's relationship with the Instructions and the meaning of "c							aning of "connect	ed" in Part B(.	2) of
Connect with the issuer or in					_		ner than an inves	tment fund)	
Director or officer of the inve			anager l				or investment fu		
<u> </u>		vestillent fana m	unager		700 01 1110	100001	or investment ra	ia managei	
✓ None of the above									
d) Compensation details									
Provide details of all compensation pa Canadian dollars. Include cash commi- incidental to the distribution, such as c	ssions, securities-b lerical, printing, le	ased compensation gal or accounting	on, gifts, disco services. An	ounts or othe issuer is not	r compens required to	sation. L o ask fo	Do not report pay	ments for ser	vices
allocation arrangements with the direct		<u>-</u> -	-individual co	ompensated l	by the issu	ier.			
Cash commissions paid	3,375.0	00			Security co	ode 1	Security code 2	Security cod	e 3
Value of all securities distributed as compensation ⁴			Security code	es					
	of warrants, option	s or other rights							\neg
Other compensation ⁵		Describe							
Total compensation paid	3,375.0	00							
Check box if the person w			npensation (describe the	terms bel	low)			
⁴ Provide the aggregate value of all so additional securities of the issuer. Inc rights exercisable to acquire addition ⁵ Do not include deferred compensati	dicate the security al securities of the	codes for all sec							

Item 9 - Directors, Execu	TIVE OFFICERS	AND PROMOT	ERS OF THE ISS	SUER					
If the issuer is an investment fund, 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 nar	me of reporting issue	er							
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. [V] 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 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	Secondary given names						
Title	Marketing Operations Manager							
Telephone number		ashley@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	dan@plaza.v	entures			

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.