Form 45-106F1 Report of Exempt Distribution

BCSC EDER Reference Number 8657376

ITEM 1 - REPORT TYPE										
✓ New report										
	amended, provide filing date	of report that is being am	ended	(YYYY-MM-DD)						
ITEM 2 - PARTY CERTIFYING	THE REPORT									
Indicate the party certifying the repor Instrument 81-106 Investment Fund (vestment fund, refer to secti	on 1.1 of National						
Investment fund issuer										
Suer (other than an investment fund)										
	,									
Item 3 - Issuer Name and										
	Provide the following information about the issuer, or if the issuer is an investment fund, about the fund.									
Full legal na	, ,	•								
Previous full legal na	ame Blackchain Solutions I	nc.								
If the issuer's name changed	in the last 12 months, provide most	recent previous legal name.								
Web	osite www.blackiceinc.com	(if applicab	le)							
If the issuer has a legal entity identifie	er₄ provide below. Refer to Part B of	the Instructions for the definition	of "legal entity identifier".							
Legal entity identi	ifier									
If two or more issuers distributed a sir	ngle security, provide the full legal n	name(s) of the co-issuer(s) other th	nan the issuer named above	.						
Full legal name(s) of co-issue	ər(s)	(if applicable)								
ITEM 4 - UNDERWRITER INFO	ORMATION									
If an underwriter is completing the rep	port, provide the underwriter's full le	egal name and firm NRD number.		-						
Full legal name										
Firm NRD number		(if applicable)								
If the underwriter does not have a firm	n NRD number, provide the head of	ffice contact information of the un	derwriter.							
Street address										
Municipality		Province/State		ĺ						
Country		Postal code/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 1								
If the issuer is in the mining industry , indicate the stage of operations. This does not apply to issuers that provide services to issuers operating in the mining industry. Select the category that best describes the issuer's stage of operations.								
Exploration Development Production								
Is the issuer's primary business to invest all or substantially all of its assets in any of the following? If yes, select all that apply.								
Mortgages Real estate Commercial/business debt Consumer debt Private companies								
Cryptoassets								
b) Number of employees								
Number of employees: 🔽 0 - 49 🗌 50 - 99 🗌 100 - 499 🗌 500 or more								
c) SEDAR profile number								
Does the issuer have a SEDAR profile?								
No Ves If yes, provide SEDAR profile number 0 0 0 2 5 9 8 4								
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 Financial year-end								
YYYY MM DD 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								
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 ma	anager information								
Full legal name									
Firm NRD number	(if applicable)								
If the investment fund mana	ger 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 tha	t most accurately identifies the issuer (select only one) .								
Money market	Equity Fixed income Balanced								
Alternative strateg	ies Cryptoasset Other (describe)								
Indicate whether one or bot	n of the following apply to the investment fund .								
Invests primarily in	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 format	ion 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								
	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	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 \$500	DM \$500M to under \$1B \$1B or over Date of NAV calculation:								
	YYYY MM DD								

LIEM	/ -	INF	ORM	ATIC	N A	BOUT THE D	DISTRIBUTION					
purch conne	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.											
a)	Cur	renc	у									
Select	the	curre	ncy or (curren	cies ir	n which the distri	bution was made.	All dollar amounts pro	video	d in the report	must be in Canadia	an dollars.
✓ C	ana	dian	dollar			US dollar	Euro	Other (descr	ribe))		
b)	Dist	tribut	ion da	ate(s)								
State as bo	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 Start date 2018 11 13 YYYY MM DD End date 2018 11 13 YYYY MM DD											
c)	Det	ailed	purch	naser	infor	mation						
Com	plet	te Sc	hedul	e 1 of	f this	form for eacl	h purchaser and	l attach the schedu	le to	to the comple	eted report.	
d)	Tvp	es o	f secu	rities	distri	buted	-			-	-	
,							ons reported on a n	per security basis. Refer	to P	Part A(12) of th	e Instructions for h	ow to indicate the
								CUSIP number assigne				
											Canadian \$	
										Single or		
Secu			SIP num applical			Description	of security	Number of securities		lowest price	Highest price	Total amount
						s, each Unit d	comprised of	6,200,000	.00	0.100	0 0.1000	620,000.00
					one com	mon share in	the capital of					
				1	the							
UE	3 S)228J		issu whol	er (a Unit Sha le	are) and one					
				1	trans	sferrable com	mon share					
					purc Warı	hase rant						
e)	Dot		of right				ngeable securitie					
,							-		ato f	for each right 1	f any convertible (o	vehanagable securities
								rcise price and expiry de r terms for each conver				xchangeable securilies
Con exch	vertib ange		Unc	lerlying			se price	Expiry date	(Conversion		
	irity c			rity coo			dian \$)	(YYYY- MM-DD)		ratio	Describe other in	tems (if applicable)
		1				Lowest 0.1500	Highest 0.1500		1:1	1	Forced exercis	e clause at
W	Ν	T	C	М	S	0.1000	0.1000	2020-11-13			\$0.40	
f)	Sum	nmar	y of th	e dist	tribut	ion by jurisdict	ion and exemption	on				
State purch distrii This t purch jurisd	the t aser outio able aser ictio	total c resid on in c requi resid n.	dollar a es and i jurisd res a se es, if a	imoun for ea iction eparat purche	t of se ch exe of Ca e line aser re	ecurities distribut emption relied or nada, include dis item for: (i) each esides in a jurisd	ed and the number n in Canada for tha tributions to purch jurisdiction where iction of Canada, a	r of purchasers for each at distribution. However asers resident in that ju a purchaser resides, (iu nd (iii) each exemption vise state the country.	r, if a urisd i) ead	an issuer locate diction of Canae ach exemption r	ed outside of Canac da only. relied on in the juris	la completes a sdiction where a
_		Prov	ince or untry				Exemption relie			Number of uniqu purchasers	Ie ²² Total ar	nount (Canadian \$)

country	Exemption relied on	purchasers	Total amount (Canadian \$)
British Columbia	NI 45-106 2.3 [Accredited investor]	12	255,000.00
British Columbia	Investment dealer- exemption (BC, AB, SK, MB, NB)	1	15,000.00

British Columbia	NI 45-106 2.10 [Minimum amount investment]	1	350,000.00
	Total dollar amount of se	curities distributed	620,000.00
	Total number of unique purchasers ^{2b}	14	

^{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.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 (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 compensation was paid, or will be paid, in connection with the distribution.

No No

✓ Yes

If yes, indicate number of persons compensated.

4

a) Name of person compe	ensated and registra	tion status							
Indicate whether the person compensated is a registrant. No 🗸 Yes									
If the person compensated is an	individual, provide the	name of the indivi	dual.						
Full legal name of individ	dual								
	Family name					Secondary give	en names		
If the person compensated is not	an individual, provide	the following infor	mation.						
Full legal name of	of non-individual C	anaccord Genui	ty Corp.						
Fir	m NRD number	9 0 0			(if app	licable)			
Indicate whether the person compensated facilitated the distribution through a funding portal or an internet-based portal. 🔽 No 🗌 Yes									
b) Business contact inform	nation								
If a firm NRD number is not prov	vided in Item 8 (a), prov	vide the business co	ontact information	n of the perso	n being con	npensated.			
Street address									
Municipality				Provin	nce/State				
Country			F	Postal code/	Zip code				
Email address			ĺ	Telephone	e number				
c) Relationship to issuer of	or investment fund n	nanager	_						
Indicate the person's relationship the Instructions and the meaning						aning of "connected"	in Part B(2) of		
Connect with the issue						ner than an investme	ent fund)		
		-							
Director or officer of the	e investment fund or i	nvestment fund ma	anager	Employee of	the issuer	or investment fund r	nanager		
None of the above									
d) Compensation details									
Provide details of all compensation Canadian dollars. Include cash co incidental to the distribution, such	ommissions, securities-l h as clerical, printing, l	based compensatic egal or accounting	on, gifts, discounts services. An issue	or other com r is not requir	pensation. red to ask fo	Do not report payme	nts for services		
allocation arrangements with the	[individual compe	nsated by the	issuer.				
Cash commissions paid	,	00		Secur	rity code 1	Security code 2 S	Security code 3		
Value of all securities distributed as compensation		:	Security codes	W	N T				
Describe te	rms of warrants, optio	ns or other rights	56,000 warrar clause at \$0.4		for two ye	ears with forced ex	ercise		
Other compensation	5	Describe							
Total compensation paid	d 5,600.	00							
Check box if the person will or may receive any deferred compensation (describe the terms below)									
⁴ Provide the aggregate value of all securities distributed as compensation, <u>excluding</u> options, warrants or other rights exercisable to acquire additional securities of the issuer. Indicate the security codes for all securities 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 compe	nsated and regis	tration sta	atus									
Indicate whether the person compensated is a registrant. No Ves												
If the person compensated is an i	ndividual, provide t	he name of	f the individ	dual.								
Full legal name of individ	lual											
	1		First	given na	ame		Seco	ndary given	names			
If the person compensated is not	an individual, provi	de the follo	wing infor	mation.								
Full legal name o	f non-individual	PI Financ	cial Corp.									
Firr	m NRD number	5	2 9	0				(if appl	icable)			
Indicate whether the person compensated facilitated the distribution through a funding portal or an internet-based portal. No 🗌 Yes											Yes	
b) Business contact inform	nation											
If a firm NRD number is not prov	ided in Item 8 (a), p	rovide the l	business co	ontact infor	mation	of the p	person b	eing com	pensated.			
Street address												
Municipality						Р	rovince	/State				٦
Country					Po	ostal c	ode/Zip	o code				
Email address						Telepl	hone n	umber				
c) Relationship to issuer of	r investment fund	d manage	r									
Indicate the person's relationship the Instructions and the meaning									ning of "co	nnected" in	Part B(2)	of
Connect with the issuer				F - F		-	•		er than an	investmen	t fund)	
Director or officer of the	e investment fund c	or investme	nt fund ma	anager		Employ	ee of the	e issuer o	or investme	ent fund ma	anager	
✓ None of the above				U							U	
d) Compensation details												
Provide details of all compensation Canadian dollars. Include cash con incidental to the distribution, such allocation arrangements with the	mmissions, securitie as clerical, printing	es-based co g, legal or a	mpensatio Iccounting	n, gifts, dis services. A	counts c n issuer	or other is not r	· comper equired	nsation. E to ask fo	Do not repo	rt payment	s for servi	ices
Cash commissions paid	5,20	00.00					Security	code 1	Security co	de 2 Sec	curity code	3
Value of all securities distributed as compensation⁴			S	Security co	des	,	W N	Т				
Describe ter	ms of warrants, op	tions or oth	ner rights	52,000 v clause a			0.15 foi	r two ye	ars with fo	prced exe	rcise	
Other compensation ⁵	; [Describe									
Total compensation paid	I 5,20	00.00										
Check box if the pers	on will or may rece	eive any de	ferred com	pensation	(descril	be the t	terms be	elow)				
⁴ Provide the aggregate value of all securities distributed as compensation, <u>excluding</u> options, warrants or other rights exercisable to acquire additional securities of the issuer. Indicate the security codes for all securities 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 a	nd registratio	n status							
Indicate whether the person compensated	s a registrant.		No No	\checkmark	Yes				
If the person compensated is an individual,	provide the na	me of the indivi	dual.						
Full legal name of individual									
	Family	name	Fi	st given n	ame		Secor	ndary given n	ames
If the person compensated is not an individ	ual, provide the	e following info	rmation.						
Full legal name of non-inc	lividual Hay	wood Securiti	es Inc.						
Firm NRD number 1 6 3 0 (if applicable)									
Indicate whether the person compensated	facilitated the d	istribution throu	ıgh a funding po	rtal or an	n internet-	-based po	ortal.	🖌 No	Yes
b) Business contact information									
If a firm NRD number is not provided in Ite	m 8 (a), provide	e the business c	ontact informatio	on of the	person be	ing com	pensated.		
Street address									
Municipality				Р	rovince/	State			
Country]	Postal c	code/Zip	code			
Email address]	Telep	hone nu	Imber			
c) Relationship to issuer or investn	nent fund mar	nager							
Indicate the person's relationship with the the Instructions and the meaning of "contri							ning of "cor	nected" in I	Part B(2) of
Connect with the issuer or invest				-	-		er than an i	investment	fund)
Director or officer of the investme	ent fund or inve	estment fund ma	anager	Employ	vee of the	issuer o	r investme	nt fund mar	nager
\checkmark None of the above									-
d) Compensation details									
Provide details of all compensation paid, or Canadian dollars. Include cash commission incidental to the distribution, such as clerica allocation arrangements with the directors,	s, securities-bas Il, printing, lego	ed compensations and compensations and compensations and compensations and compensations and compensations are and compensations are compensations and compensations are compensations and compensations are compensations are and compensations are compensations are compensations are compensations are compensations are compensations are and compensations are compensations are compensations are compensations are compensations are compensations are and compensations are compensations are compensations are compensations are compensations are compensations are	on, gifts, discount services. An issu	s or othei er is not i	r compen: required t	sation. De o ask for	o not repor	t payments	for services
Cash commissions paid	4,000.00				Security c	ode 1	Security coo	de 2 Secu	urity code 3
Value of all securities distributed as compensation ⁴			Security codes		D C	Т	W N	Т	
Describe terms of wa	rrants, options	or other rights	40,000 warra clause at \$0.		0.15 for	two yea	rs with fo	rced exerc	cise
Other compensation ⁵		Describe							
Total compensation paid	4,000.00								
Check box if the person will or	may receive a	J ny deferred cor	npensation (des	cribe the	terms be	low)			
⁴ Provide the aggregate value of all securi additional securities of the issuer. Indicate rights exercisable to acquire additional se ⁵ Do not include deferred compensation.	the security co	odes for all sec	on, <u>excluding</u> op urities distributed	tions, wa 1 as comp	prrants or pensation	other rigi n, <u>includii</u>	hts exercis. ng options,	able to acqu warrants o	uire r other

a) Name of person comper	nsated and regist	ration status							
Indicate whether the person comp	pensated is a registro	ant.	No No	 ✓ 	Yes				
If the person compensated is an individual, provide the name of the individual.									
Full legal name of individ	lual								
	Fa	amily name	Fire	st given na	me	Second	lary given names		
If the person compensated is not a	an individual, provia	le the following info	mation.						
Full legal name of	f non-individual [Leede Jones Gab	le Inc.						
Firm NRD number 5 7 7 0 (if applicable)									
Indicate whether the person compensated facilitated the distribution through a funding portal or an internet-based portal.									
b) Business contact inform	ation								
If a firm NRD number is not provi	ided in Item 8 (a), pr	ovide the business c	ontact information	n of the pe	erson being co	mpensated.			
Street address									
Municipality				Pro	ovince/State				
Country] F	Postal co	ode/Zip code				
Email address				Teleph	one number				
c) Relationship to issuer or	r investment fund	manager							
Indicate the person's relationship the Instructions and the meaning							ected" in Part B(2	?) of	
Connect with the issuer					-		vestment fund)		
Director or officer of the	e investment fund or	investment fund m	anager	Employe	e of the issue	r or investmen	t fund 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 as clerical, printing,	-based compensatic legal or accounting	on, gifts, discounts services. An issue	or other o r is not re	compensation. equired to ask f	Do not report	payments for serv	/ices	
Cash commissions paid	80	0.00		S	Security code 1	Security code	e 2 Security code	e 3	
Value of all securities distributed as compensation ⁴			Security codes	V	V N T				
Describe terms of warrants, options or other rights 8,000 warrants at \$0.15 for two years with forced exercise clause at \$0.40									
Other compensation ⁵		Describe							
Total compensation paid	800	0.00							
Check box if the pers	on will or may recei	ve any deferred cor	npensation (desc	ribe the te	erms below)				
⁴ Provide the aggregate value of a additional securities of the issuer rights exercisable to acquire add ⁵ Do not include deferred comper	r. Indicate the secur litional securities of	ity codes for all sec							

ITEM 9 - DIRECTORS, EXECU	TIVE OFFICERS	AND PROMOT	ERS OF THE ISS	SUER						
If the issuer is an investment fund	d, do not complete	Item 9. Procced to	Item 10.							
Indicate whether the issuer is any o	f the following (seled	ct the one that appli	es - if more than one	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 issuer ⁶										
Provide name of foreign public issuer										
Issuer distributing only eligible foreign securities and the distribution is to permitted clients only ⁷										
If the issuer is at least one of the	above, do not com	plete Item 9(a) – (a	c). Proceed to Item	10.						
⁶ An issuer is a wholly owned subsid securities that are required by law to respectively. ⁷ Check this box if it applies to the cu clients. Refer to the definitions of "e	o be owned by its di urrent distribution ev ligible foreign secur	irectors, are benefic ven if the issuer mac rity" and "permitted o	ially owned by the re de previous distribut client" in Part B(1) of	eporting issuer or t ions of other types	he foreign	public is	suer,			
a) Directors, executive officer	s and promoters	of the issuer								
Provide the following information for each director, executive officer and promoter of the issuer. For locations within Canada, state the province or territory; otherwise state the country. For "Relationship to issuer", "D" – Director, "O" – Executive Officer, "P" – Promoter.										
Organization or company name	Secondary given Business location of non-individual or residentail Relationship to issuer (select all that apply)									
				Province or	country	D	0	Р		
b) Promoter information										
If the promoter listed above is not an individual, provide the following information for each director and executive officer of the promoter. For locations within Canada, state the province or territory; otherwise state the country. For "Relationship to promoter", "D" – Director, "O" – Executive Officer.										
Organization or company name Family name First given name Secondary given names Residential jurisdiction of individual (selection)				Rela (select c	Relationship to promo elect one or both if appl		oter licable)			
				Province or	D		-			
				country			C)		
				country			C)		

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	Trackloop Analytics Corp.						
Full legal name	Kalyan						
	Family name	First given name	·	Seconda	ary given n	ames	
Title	Chief Technology Officer						
Telephone number	7789383367	Email address	zayn@bl	ckchain.c	a		
Signature	Zayn Kalyan Date			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 individual certifying the report

Full legal name	Mark	Diana			Title	Consultant
	Family name	First given name	Secondary	given names		
Name of company	Greystone Corporate Se	ervices Inc.				
Telephone number	7789082730	E	mail address	diana@grey	stonecor	p.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.