Form 45-106F1 Report of Exempt Distribution

BCSC EDER Reference Number 8969450

ITEM 1 - REPORT TYPE										
✓ New report										
Amended report If amended, provide filing date of report that is being amended (YYYY-MM-DD)										
ITEM 2 - PARTY CERTIFY	YING THE REPORT									
	e report (select only one). For guida Fund Continuous Disclosure and th			nd, refer to section 1.1 of National						
Investment fund issuer										
Ssuer (other than	Issuer (other than an investment fund)									
✓ Underwriter										
	AND OTHER IDENTIFIERS									
	ion about the issuer, or if the issuer		bout the fund.							
	egal name FinServ Acquisiti	ion Corp.								
Previous full legal name										
If the issuer's name ch	If the issuer's name changed in the last 12 months, provide most recent previous legal name.									
	Website (if applicable)									
If the issuer has a legal entity i	dentifier, provide below. Refer to Po	art B of the Instructions fo	or the definition of "legal en	tity identifier".						
Legal entity	identifier									
If two or more issuers distribute	ed a single security, provide the full	legal name(s) of the co-i	 issuer(s) other than the issue	er named above.						
Full legal name(s) of co	-issuer(s)		(if applicable)							
ITEM 4 - UNDERWRITER	R INFORMATION									
	the report, provide the underwriter	r's full legal name and fir	m NRD number.							
Full legal name	Cantor Fitzgerald & Co.									
Firm NRD number	8 8 0	(if a	applicable)							
If the underwriter does not hav	e a firm NRD number, provide the	head office contact inforr	mation of the underwriter.							
Street address										
Municipality		Pr	rovince/State							
Country		Postal co	ode/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 2 3 9 1 0
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.
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? Image: Second sec
d) Head office address
Street address c/o Ellenoff Grossman & Schole LLP, 1345 Avenue of the Americas Province/State New York Municipality New York Province/State New York
Municipality New York Postal code/Zip code 10105
Country United States Telephone number 6469658218
e) Date of formation and financial year-end
Date of formation 2019 08 09 Financial year-end 12 31 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.
AII 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 3 1 8 0 8 5
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 United States - NASDAQ
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	S5M to under \$25M	S25M to under \$100M						
✓ \$100M to under \$500M	S500M to under \$1B	\$1B or over						

If the issue is an investment fund, provide the following information: a) Investment fund manager information Full legal name Furn NRD number 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 Guntry Postal code/Zip code Telephone number D Type of investment fund Tree of investment fund that most accurately identifies the issuer (select only one). Alternative strategies Cryptoasset Other (describe) Indicate whether one or both of the following apply to the investment fund. Investment fund that most accurately identifies the issuer (select only one). Alternative strategies Cryptoasset Other (describe) Indicate whether one or both of the following apply to the investment fund. Investment fund that most accurately identifies the issuer (select only one). Indicate whether one or both of the following apply to the investment fund. Investment fund issuers Is a UCIT's Fund' 'understaining for the Collective Investment fund issuers Is a UCIT's Fund' 'understaining for the Collective Investment of Transferable Securities funds (UCIT's Funds) are investment funds regulated by the European Union (C) Date of formation and financial year-end of the investment fund Suppresent fund a reporting issuer in any jurisdication of Canada? No Yes It he investment fund a reporting issuer in any jurisdication of Canada? No Yes It he investment fund hars a CUSP number, provide below (first 6 digits only) CUSP number On O Public listing status of the investment fund is a reporting issuer. All All All </th
Full legal name
Firm NRD number (if applicable) 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
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CUSIP number
name of an exchange and not a trading facility such as, for example, an automated trading system
Exchange name
f) Net asset value (NAV) of the investment fund
Select the NAV range of the investment fund as of the date of the most recent NAV calculation (Canadian \$).
L L \$\the under \$\mathbf{S}M \qquad L \qquad \mathbf{S}M \text{ to under \$\mathbf{S}M \qquad \text{ to under \$\mathbf{S}M \qquad \text{to under \$\mathbf{S}M
\$0 to under \$5M \$5M to under \$25M \$25M to under \$100M \$100M to under \$500M \$500M to under \$1B \$1B or over Date of NAV calculation:

ITEM 7 - INFORMATION ABOUT THE DISTRIBUTION

purchasers resident in that jurisd	nada completes a distribution in a juris iction of Canada only. Do not include i which must be disclosed in Item 8. The	n Item 7 securities issue	ed as payment of	commissions or f	inder's fees in				
a) Currency									
Select the currency or currencies	in which the distribution was made. All	dollar amounts provid	ed in the report n	nust be in Canadi	ian dollars.				
Canadian dollar	US dollar Euro	Other (describe	e)						
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 2019 11 05									
	11 05		te 2019	11 05 MM DD					
c) Detailed purchaser info									
	s form for each purchaser and a	ttach the schedule	to the comple	ted report.					
d) Types of securities dist									
Provide the following information	n for all distributions reported on a per ISIP number, indicate the full 9-digit Cl				ow to indicate the				
				Canadian \$	3				
Security code CUSIP number (if applicable)	Description of security	Number of securities	Single or lowest price	Highest price	Total amount				
UBS318085206 One war		84,836,850.00							
e) Details of rights and co	nvertible/exchangeable securities								
	ns) were distributed, provide the exercis nversion ratio and describe any other te				exchangeable securities				
Convertible / exchangeable security code Underlying security code	Exercise price (Canadian \$) Lowest Highest	Expiry date (YYYY- MM-DD)	Conversion ratio	Describe other	items (if applicable)				
W N T C M S	15.1260		t	Each whole Warrant entitles the holder to purchase one share of Common Stock for US \$11.50 per share.					
f) Summary of the distribu	tion by jurisdiction and exemption	I							
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	Exemption relied o	n	Number of unique	e ^{2ª} Total a	mount (Canadian \$)				
country		purchasers							
Alberta	NI 45-106 2.3 [Accredited inv	vestor]		1	6,576,500.00				
Alberta British Columbia	NI 45-106 2.3 [Accredited inv NI 45-106 2.3 [Accredited inv	-		1	6,576,500.00 5,261,200.00				
Alberta British Columbia Ontario	-	restor]							
British Columbia	NI 45-106 2.3 [Accredited inv NI 45-106 2.3 [Accredited inv	restor]	curities distribu	1 6	5,261,200.00				
British Columbia	NI 45-106 2.3 [Accredited inv NI 45-106 2.3 [Accredited inv Tota	restor]	curities distribu	1 6	5,261,200.00 72,999,150.00				

^{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.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)

Ітем 8 - Со	MPENSATION	INFORMATION	
		on (as defined in NI 45-106) to whom the issuer directly provides, o tional copies of this page if more than one person was, or will	
Indicate whet	her any compensa	tion was paid, or will be paid, in connection with the distribution.	
🗌 No	✓ Yes	If yes, indicate number of persons compensated.	2

a) Name of person compe	ensated and regis	stration	status								
Indicate whether the person com	npensated is a regist	rant.			D	\checkmark	Yes				
If the person compensated is an	individual, provide	the nam	e of the ind	dividual.							
Full legal name of indivi	dual										
		Family na	ame		First	t given n	ame		Seconda	iry given nam	nes
If the person compensated is not	t an individual, prov	ide the f	following ir	nformation.							
Full legal name	of non-individual	Canto	r Fitzgera	ald & Co.							
Fi	rm NRD number	8	8	0				(if app	licable)		
Indicate whether the person con	npensated facilitated	the dis	tribution th	nrough a fun	ding port	al or an	interne	t-based	portal.	🖌 No	Yes
b) Business contact inform	mation										
If a firm NRD number is not pro	vided in Item 8 (a), _I	orovide t	the busines	s contact in	formation	of the p	person b	eing cor	npensated.		
Street address											
Municipality						Р	rovince	/State			
Country					Р	ostal c	ode/Zip	o code			
Email address						Telep	hone n	umber			
c) Relationship to issuer of	or investment fun	d mana	iger								
Indicate the person's relationship the Instructions and the meaning Connect with the issue Director or officer of th V None of the above	g of "control" in sec er or investment fur	tion 1.4 Id mana	of NI 45-10 ger	06 for the pu	rposes of	<i>comple</i> Insider	e <i>ting this</i> of the is	section. suer (otl		estment fur	nd)
d) Compensation details											
Provide details of all compensation Canadian dollars. Include cash ca incidental to the distribution, suc allocation arrangements with the Cash commissions pai	ommissions, securiti h as clerical, printin e directors, officers c	es-based g, legal	d compense or account	ation, gifts, c ing services.	liscounts o An issuer	or other is not r nsated b	r compei required	nsation. to ask fo suer.	Do not report p	ayments for , or report o	r services
Value of all securities	s [O servite							<u>, , , , , , , , , , , , , , , , , , , </u>
distributed as compensatior	1 ⁴			Security	codes						
Describe te	erms of warrants, op	otions or	other righ	ts							
Other compensation	5 2,322,0	00.00	Describ		writing d x. C\$0.7		nts and	commi	ssions = US\$	0.55 per u	ınit
Total compensation pai	d 2,322,0	00.00									
✓ Check box if the per	son will or may rec	eive any	deferred	compensatio	on (descri	ibe the	terms b	elow)			
\$1,483,500 (US\$0 business combinat		ox. C\$	0.46) in d	eferred co	mpensat	tion pa	yable u	ipon co	mpletion of a	n initial	
⁴ Provide the aggregate value o additional securities of the issue rights exercisable to acquire ag ⁵ Do not include deferred competi- security of the security of the se	er. Indicate the sec Iditional securities d	urity cod	les for all s								

a) Name of person comp	ensated and regi	stration	status									
Indicate whether the person co	mpensated is a regis	trant.		🗌 No)	\checkmark	Yes					
If the person compensated is ar	n individual, provide	the nam	e of the inc	lividual.								
Full legal name of indiv	ridual]
		Family na	ame	I	First	t given n	ame		Seconda	ry given na	ames	-
If the person compensated is no	ot an individual, prov	vide the f	ollowing in	formation.								
Full legal name	of non-individual	Barcla	iys Capita	al Inc.								
F	irm NRD number	6	8	0 0				(if app	olicable)			
Indicate whether the person co	mpensated facilitated	d the disi	tribution th	rough a fun	ding port	al or ar	n interne	et-based	portal.	✓ No	Yes	
b) Business contact infor	mation											
If a firm NRD number is not pro	ovided in Item 8 (a),	provide t	he busines	s contact inf	ormation	of the	person Ł	oeing cor	mpensated.			
Street address												
Municipality						Р	rovince	e/State				
Country					Р	ostal c	code/Zi	p code				
Email address						Telep	hone n	umber				
c) Relationship to issuer	or investment fun	d mana	iger									
Indicate the person's relationsh the Instructions and the meanin Connect with the issu Director or officer of t	ng of "control" in sec	tion 1.4 o nd mana	of NI 45-10 ger	06 for the pu	rposes of	comple Insider	eting this of the is	s section ssuer (ot		estment f	fund)	
d) Compensation details												
Provide details of all compensat Canadian dollars. Include cash o incidental to the distribution, su allocation arrangements with th Cash commissions pa	commissions, securiti ch as clerical, printin ne directors, officers c	ies-based 1g, legal (compense or accounti	ation, gifts, d ing services.	liscounts An issuer	or othei r is not i	r compe required	nsation. ' to ask fo suer.	Do not report p	ayments or report	for services	l
Value of all securitie	es 🗌			Coourity	adaa							
distributed as compensation	n ⁴			Security	codes	L						
Describe t	erms of warrants, o	ptions or	other righ	ts								
Other compensatio	n⁵ 2,322,0	00.00	Describ		writing d x. C\$0.7		nts and	commi	ssions = US\$	0.55 per	· unit	
Total compensation pa	id 2,322,0	00.00										
✓ Check box if the period	rson will or may rec	eive any	deferred o	compensatio	on (descr	ibe the	terms b	elow)				
\$1,483,500 (US\$0 business combina		rox. C\$(0.46) in d	eferred cor	npensat	tion pa	iyable i	upon co	mpletion of a	n initial		
⁴ Provide the aggregate value of additional securities of the issu- rights exercisable to acquire a ⁵ Do not include deferred comp	ier. Indicate the sec dditional securities o	urity coa	les for all s									

ITEM 9 - DIRECTORS, EXECU	TIVE OFFICERS	AND PROMOT	ERS OF THE ISS	SUER					
If the issuer is an investment fund	l, do not complete	Item 9. Procced to	Item 10.						
Indicate whether the issuer is any o	f the following (seled	t the one that appli	es - if more than one	e applies, select onl	y one).				
Reporting issuer in any juris	diction of Canada								
Foreign public issuer									
Wholly owned subsidiary of	a reporting issuer i	n any jurisdiction of	Canada ⁶						
Provide nan	ne of reporting issue	er							
Wholly owned subsidiary of	a foreign public iss	uer ⁶							
Provide name of	foreign public issue	ər							
✓ Issuer distributing only eligit	ble foreign securitie	s and the distributio	n is to permitted clie	ents only ⁷					
If the issuer is at least one of the	above, do not com	plete Item 9(a) – (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	s and promoters	of the issuer							
Provide the following information for territory; otherwise state the country.						tate the	province	or	
Organization or company name	Family name	First given name	Secondary given names	non-individu resident jurisdictio	Business location of non-individual or residentail jurisdiction of individual				
				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 Relationship to					
				Province or country	D		C)	
c) Residential address of eac	h individual								

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

ITEM 10 - CERTIFICATION

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

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

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

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

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

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

Name of issuer/underwriter/ investment fund manager/agent	Cantor Fitzgerald & Co.								
Full legal name	Shields	William							
	Family name	First given name	· ·	Secondary given names					
Title	Chief Compliance Officer								
Telephone number	2128294828	Email address	wshields	shields@cantor.com					
Signature	(signed) "William Shields"	Date	2019	11	15				
			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	Basham	Kelley			Title	Vice-President
	Family name	First given name	Secondary	given names		
Name of company	Cantor Fitzgerald & Co.					
Telephone number	2128295428		Email address	kelley.basha	am@cant	or.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.