Form 45-106F1 Report of Exempt Distribution

BCSC EDER Reference Number 9972570

ITEM 1 - REPORT TYPE										
New report										
Amended report If amended, provide filing date of report that is being amended 2022 10 11 (YYYY-MM-DD)										
ITEM 2 - PARTY CERTIFY	ING THE	REPOR	Г							
Indicate the party certifying the Instrument 81-106 Investment									restment fund, refer to sec	tion 1.1 of National
Investment fund is	ssuer									
✓ Issuer (other than	an inves	tment fur	nd)							
ITEM 3 - ISSUER NAME										
Provide the following informati					invest	ment fu	ınd, abou	it the fund.		
		gal name Lobe Sciences Ltd.								
Previous full le	gal name									
If the issuer's name cho	anged in the	last 12 mc	onths, pr	ovide mo	st rece	ent previ	ious legal	l name.		
	Website							(if applicabl	e)	
If the issuer has a legal entity id	dentifier <u>,</u> pro	vide below	. Refer t	o Part B c	of the I	nstructio	ons for th	he definition o	of "legal entity identifier".	
Legal entity	identifier									
If two or more issuers distribute	ed a single s	ecurity, pro	vide the	full legal	name	(s) of th	e co-issu	er(s) other th	an the issuer named abov	е.
Full legal name(s) of co	-issuer(s)							(if applicable	e)	
ITEM 4 - UNDERWRITER	INFORM	ATION								
If an underwriter is completing	the report, p	provide the	underw	riter's full	legal	name a	nd firm N	NRD number.		-
Full legal name										
Firm NRD number	Firm NRD number (if applicable)									
If the underwriter does not have	e a firm NRI	D number, p	orovide	the head	office	contact	informati	ion of the un	derwriter.	
Street address										
Municipality							Provi	ince/State]
Country						Pos	tal code	e/Zip code		
Telephone number								Website		(if applicable)

ITEM 5 - ISSUER INFORMATION
If the issuer is an investment fund, do not complete Item 5. Proceed to Item 6.
a) Primary industry
Provide the issuer's North American Industry Classification Standard (NAICS) code (6 digits only) that in your reasonable judgment most closely corresponds to the issuer's primary business activity.
NAICS industry code 5 4 1 7 1 4
If the issuer is in the mining industry , indicate the stage of operations. This does not apply to issuers that provide services to issuers operating in the mining industry. Select the category that best describes the issuer's stage of operations.
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
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?
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
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
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

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
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 County Postal code/Zip code County Telephone number Postal code/Zip code Do Type of investment fund Type of investment fund Type of investment fund that most accurately identifies the issuer (select only one). Do Type of investment fund that most accurately identifies the issuer (select only one). Do Money market De Quity De County De C
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CUSIP number
name of an exchanae and not a tradina facility such as, for example, an automated tradina 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

If an issuer located outside of Car purchasers resident in that jurisdi connection with the distribution, Schedule 1 of the report.	nada completes a iction of Canada o	distribution in a ju only. Do not include	e in Item 7 securities issi	ued as p	payment of	сотті	ssions or fi	nder's fees in
a) Currency								
Select the currency or currencies	in which the distri	bution was made.	All dollar amounts prov	ided in	the report n	nust be	in Canadi	an dollars.
✓ Canadian dollar	US dollar	Euro	Other (descri	be)				
b) Distribution date(s)								
State the distribution start and en as both the start and end dates. I distribution period covered by the	f the report is bein	-		-				
Start da	^{ite} 2022	10 03	End d	late	2022	10	03	
	YYYY	MM DD			YYYY	MM	DD	
c) Detailed purchaser info	rmation							
Complete Schedule 1 of thi	s form for each	n purchaser and	l attach the schedul	e to th	he comple	ted re	port.	
d) Types of securities distri	ributed							
Provide the following information security code. If providing the CU								ow to indicate the
			_				Canadian \$	
Security code CUSIP number (if applicable)	Description	of security	Number of securities		Single or lowest price	High	nest price	Total amount
CMS			9,800,836.0	00	0.1000)		980,083.60
e) Details of rights and con	nvertible/exchar	ngeable securitie	es					
If any rights (e.g. warrants, option were distributed, provide the con								xchangeable securities
Convertible / exchangeable security code Security code	Exercis (Canac		Expiry date (YYYY- MM-DD)		version atio	Des	cribe other i	tems (if applicable)
		5						
f) Summary of the distribu	tion by jurisdicti	on and exemption	on					
State the total dollar amount of s purchaser resides and for each ex distribution in a jurisdiction of Co This table requires a separate line purchaser resides, if a purchaser jurisdiction. For jurisdictions within Canada, s	securities distribute kemption relied on anada, include dist e item for: (i) each resides in a jurisdi	ed and the number o in Canada for tha tributions to purch jurisdiction where ction of Canada, a	r of purchasers for each at distribution. However, asers resident in that juu a purchaser resides, (ii) nd (iii) each exemption	if an is risdictio each e	suer located on of Canad exemption re	d outsia a only. elied on	le of Canac in the juris	la completes a sdiction where a
Province or country	Exemption relied		d on		Number of unique ²⁸ purchasers		Total amount (Canadian \$)	
British Columbia	NI 45-106 2.5 associates]	ds and business			1		450,000.00	
United States	United States NI 45-106 2.5 [Family, friends and business 1 associates]					1		530,083.60
		То	tal dollar amount of s	ecuriti	es distribu	Ited		980,083.60
		Total number of	of unique purchasers ²	ь		2		
^{2a} In calculating the number of u	nique purchasers	per row, count eac	h purchaser only once.	loint pu	irchasers m	ay be co	ounted as o	one purchaser.

^{2b} In calculating the total number of unique purchasers to which the issuer distributed securities, count each purchaser only once, regardless of whether the issuer distributed multiple types of securities to, and relied on multiple exemptions for, that purchaser.

g) Net proceeds to the investment fund by jurisdiction

If the issuer is an investment fund, provide the net proceeds to the investment fund for each jurisdiction of Canada and foreign jurisdiction where a purchaser resides.³ If an issuer located outside of Canada completes a distribution in a jurisdiction of Canada, include net proceeds for that jurisdiction of Canada only. For jurisdictions within Canada, state the province or territory, otherwise state the country.

Province or country	Net proceeds (Canadian \$)
Total net proceeds to the investment fund	

³"Net proceeds" means the gross proceeds realized in the jurisdiction from the distributions for which the report is being filed, less the gross redemptions that occurred during the distribution period covered by the report.

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

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

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

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

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

ITEM 9 - DIRECTORS, EXECU	TIVE OFFICERS	AND PROMOT	ERS OF THE ISS	UER					
If the issuer is an investment fund	l, do not complete l	tem 9. Procced to	Item 10.						
Indicate whether the issuer is any o	f the following (select	t the one that appli	es - if more than one	applies, select onl	y one).				
Reporting issuer in any juris	diction of Canada								
Foreign public issuer									
Wholly owned subsidiary of	a reporting issuer in	any jurisdiction of	Canada ⁶						
Provide nan	ne of reporting issue	r							
Wholly owned subsidiary of	a foreign public issu	ier ⁶						-	
Provide name of	Provide name of foreign public issuer								
Issuer distributing only eligi	ole foreign securities	and the distributio	n is to permitted clie	nts only7				-	
If the issuer is at least one of the	above, do not comp	olete Item 9(a) – (d). 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	be owned by its dir urrent distribution evo	ectors, are benefic en if the issuer mad	ially owned by the re le previous distributi	porting issuer or t ions of other types	the foreign	public is	ssuer,		
If the issuer is none of the									
a) Directors, executive officer	s and promotors of	f the issuer							
a) Directors, executive officer Provide the following information for			moter of the issuer F	or locations within	Canada s	tate the	nrovince	or	
territory; otherwise state the country.							province		
Organization or company nameFamily nameFirst given nameSecondary given namesBusiness location of non-individual or residentail jurisdiction of individualRelationship to issuer (select all that apply)									
				Province or	country	D	0	Р	
b) Promoter information									
If the promoter listed above is not an within Canada, state the province or									
Organization or company name	Family name	First given name	Secondary given	Residential jurisdiction of individual			to promo oth if appl		
				Province or country	D		С	,	
c) Residential address of eac									
Complete Schedule 2 of this form completed report. Schedule 2 also					(a) and (b)	and at	tach to tl	ne	

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	Lobe Sciences Ltd.						
Full legal name	Young						
	Family name	First given name	Secondary given names				
Title	Director and CEO						
Telephone number	9495055623	Email address phi	I@lobesciences.com				
Signature	phil@lobesciences.com	Date 2	2022 10 18				
			YYY 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	Zasitko	Brian			Title	CFO
	Family name	First given name	Secondary	given names		
Name of company	Lobe Sciences Ltd.					
Telephone number	6043433889	Er	nail address	brian@lobe	sciences.	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.