Form 45-106F1 Report of Exempt Distribution

BCSC EDER Reference Number 9674182

ITEM 1 - REPORT TYPE												
✓ New report												
☐ Amended report If amended, provide filing date of report that is being amended ☐ (YYYY-MM-D												
TEM 2 - PARTY CERTIFYING THE REPORT												
Indicate the party certifying the report (select only one). For guidance regarding whether an issuer is an investment fund, refer to section 1.1 o Instrument 81-106 Investment Fund Continuous Disclosure and the companion policy to NI 81-106.												
Investment fund issuer												
✓ Issuer (other than an investigation)	stment fund)											
☐ Underwriter	· · · · · · · · · · · · · · · · · · ·											
ITEM 3 - ISSUER NAME AND OT	HED IDENTIFIEDS											
		vestment fund, ab	out the fund									
Full legal name	Provide the following information about the issuer, or if the issuer is an investment fund, about the fund. Full legal name Tokons com Corp.											
Previous full legal name	<u>'</u>											
If the issuer's name changed in the last 12 months, provide most recent previous legal name.												
Website www.tokens.com (if applicable)												
If the issuer has a legal entity identifier. pr	ovide below. Refer to Part B of t	he Instructions for	the definition	of "legal entity identifier".								
Legal entity identifier												
If two or more issuers distributed a single :	security, provide the full legal no	ame(s) of the co-is	suer(s) other th	an the issuer named above	2.							
Full legal name(s) of co-issuer(s)			(if applicable	e)								
ITEM 4 - UNDERWRITER INFORM	MATION											
If an underwriter is completing the report,		aal name and firm	n NRD number.									
Full legal name	,]							
Firm NRD number		(if ap	oplicable)		J							
If the underwriter does not have a firm NRD number, provide the head office contact information of the underwriter.												
Street address	., .,		·]							
Municipality		Pro	vince/State									
Country		Postal cod	de/Zip code]							
Telephone number			Website (if applica									

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 1 8 2 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.												
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												
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 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
\$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 ma	anager 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
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)
Indicate whether one or bot	h of the following apply to the investment fund .
Invests primarily in	n other investment fund issuers
☐ Is a UCITs Fund¹	
¹ Undertaking for the Collec (EU) directives that allow c	tive Investment of Transferable Securities funds (UCITs Funds) are investment funds regulated by the European Union collective investment schemes to operate throughout the EU on a passport basis on authorization from one member state.
c) Date of formation a	and financial year-end of the investment fund
Date of forma	tion Financial year-end 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
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 YT
e) Public listing status	s of the investment fund
If the investment fund has a	CUSIP number, provide below (first 6 digits only)
	CUSIP number
	blicly listed, provide the name of the exchange on which the investment fund's securities primarily trade. Provide only the not a trading facility such as, for example, an automated trading system.
Exchange on an exchange and h	
-	AV) of the investment fund
	investment fund as of the date of the most recent NAV calculation (Canadian \$).
\$0 to under \$5M	s5M to under \$25M s25M to under \$100M
\$100M to under \$500	DM \$500M to under \$1B \$1B or over Date of NAV calculation: YYYY MM DD

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) 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)

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 2021 11 16

YYYY MM DD

End date 2021 11 16

c) Detailed purchaser information

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

d) Types of securities distributed

Provide the following information for all distributions reported on a per security basis. Refer to Part A(12) of the Instructions for how to indicate the security code. If providing the CUSIP number, indicate the full 9-digit CUSIP number assigned to the security being distributed.

							Canadian \$		
			CUSIP number (if applicable)	Description of security	Number of securities	Single or lowest price	Highest price	Total amount	
U	В	S	88908C309	Each Unit consists of one common share and one-half of one share purchase warrant	14,067,055.00	0.9000		12,660,349.50	

e) Details of rights and convertible/exchangeable securities

If any rights (e.g. warrants, options) were distributed, provide the exercise price and expiry date for each right. If any convertible/exchangeable securities were distributed, provide the conversion ratio and describe any other terms for each convertible/exchangeable security.

exch				derlyii urity c	•		se price adian \$)	Expiry date (YYYY- MM-DD)	Conversion ratio	Describe other items (if applicable)
						Lowest	Highest			
W	N	Т	U	В	S	1.1500		2024-11-16		Each whole warrant entitles the holder to purchase one common share.

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 ²⁸ purchasers	Total amount (Canadian \$)
Alberta	NI 45-106 2.3 [Accredited investor]	11	857,700.00
British Columbia	NI 45-106 2.3 [Accredited investor]	36	1,744,799.40
Ontario	NI 45-106 2.3 [Accredited investor]	106	9,777,249.90
Québec	NI 45-106 2.3 [Accredited investor]	6	280,600.20
	curities distributed	12,660,349.50	
	Total number of unique purchasers ^{2b}	159	

- ^{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)
1.	Investor Deck	2021-11-01	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 compensation was paid, or will be paid, in connection with the distribution. No Yes If yes, indicate number of persons compensated.	ITEM 8 - COMPENSATION INFORMATION
No ✓ Yes If yes, indicate number of persons compensated.	Indicate whether any compensation was paid, or will be paid, in connection with the distribution.
	No ✓ Yes If yes, indicate number of persons compensated. 6

a) Name of person compe	nsated and regis	stration status													
Indicate whether the person comp	pensated is a regist	rant.		☐ No		\checkmark	Yes	3							
If the person compensated is an i	ndividual, provide t	the name of the	individ	dual.											
Full legal name of individual															
Family name First given name Secondary given names													 S		
If the person compensated is not an individual, provide the following information.															
Full legal name o	f non-individual	Stifel Nicolau	ıs Caı	nada Inc.											
Firr	m NRD number	3 3	7	0					(if appl	icable)					
Indicate whether the person compensated facilitated the distribution through a funding portal or an internet-based portal. V No Yes													Yes		
b) Business contact information															
If a firm NRD number is not provided in Item 8 (a), provide the business contact information of the person being compensated.															
Street address															
Municipality						F	Provi	nce/S	State						
Country					Р	ostal	code	/Zip d	code						
Email address						Telep	ohone	e nur	nber						
c) Relationship to issuer or	r investment fund	d manager													
Indicate the person's relationship the Instructions and the meaning				-						ıning o	໌ "con	nect	ed" in	Part	B(2) of
Connect with the issuer						-	_			er thar	ı an i	nves	ment	fund)
Director or officer of the	investment fund o	or investment fu	nd ma	nager		Emplo	vee o	f the i	ssuer	or inves	stmer	nt fur	ıd mar	nage	r
✓ None of the above				J		•	,							J	
d) Compensation details															
Provide details of all compensation Canadian dollars. Include cash con incidental to the distribution, such allocation arrangements with the	mmissions, securiti as clerical, printin	es-based compe g, legal or accou	nsatio Inting	n, gifts, dis services. A	scounts c In issuer	or othe is not	er com requi	penso red to	ation. L ask fo	Do not i	report	t pay	ments	for s	ervices
Cash commissions paid	410,42	20.82					Secu	rity co	de 1	Securi	ty coc	de 2	Secu	ırity c	code 3
Value of all securities distributed as compensation ⁴	i		5	Security co	odes		U	В	S	W	N	Т			
Describe ter	ms of warrants, op	otions or other ri	ghts	Also iss					arrant	s exer	cisal	ble a	it \$0.9	90 ir	nto
Other compensation ⁵		Desc	cribe												
Total compensation paid	410,42	20.82													
Check box if the pers	· · · · · · · · · · · · · · · · · · ·				•					ahts ex		able	to aca		
additional securities of the issue rights exercisable to acquire add ⁵ Do not include deferred compen	r. Indicate the secu litional securities o	urity codes for a													ner

a) Name of person compe	ensated and regis	tration status											
Indicate whether the person com	pensated is a regist	rant.	☐ No	√	Yes								
If the person compensated is an	individual, provide t	he name of the indiv	ridual.										
Full legal name of individual													
Family name First given name Secondary given names													
If the person compensated is not an individual, provide the following information.													
Full legal name of	Full legal name of non-individual POWERONE CAPITAL MARKETS LIMITED												
Firm NRD number 1 7 0 1 0 (if applicable)													
Indicate whether the person com	pensated facilitated	the distribution thro	ough a fundin	g portal or o	an intern	⊐ et-based p	ortal.	√ 1	No [Yes			
b) Business contact inform	nation												
If a firm NRD number is not prov	vided in Item 8 (a), p	provide the business (contact inforr	nation of the	e person	being com	pensated.						
Street address													
Municipality					Provinc	ce/State							
Country			1	Postal	code/Z	ip code							
Email address				Tele	phone	number							
c) Relationship to issuer of	r investment fund	d manager											
Indicate the person's relationship the Instructions and the meaning			-				ning of "co	nnected"	in Part I	B(2) of			
Connect with the issue	r or investment fun	d manager		Inside	er of the	issuer (oth	er than an	investme	nt fund)				
Director or officer of the investment fund or investment fund manager Employee of the issuer or investment fund manager													
✓ None of the above													
d) Compensation details													
Provide details of all compensation Canadian dollars. Include cash continuities incidental to the distribution, such allocation arrangements with the	mmissions, securitien has clerical, printing	es-based compensati g, legal or accounting	on, gifts, disc g services. An	ounts or oth issuer is no	er comp t require	ensation. D d to ask for	o not repo	rt paymer	its for se	ervices			
Cash commissions paid	d 182,40	01.25			Securit	y code 1	Security co	ode 2 S	ecurity co	ode 3			
Value of all securities			Security cod	les	U	ВЅ	W N	Т					
distributed as compensation Describe te		otions or other rights	Also issu	ed 202,66	8 broke	r warrant	s exercisa	able into	one Ur	nit at			
			\$0.90 un	til Novemb									
Other compensation		Describe											
Total compensation paid	182,40)1.25											
Check box if the pers	son will or may rece	eive any deferred co	mpensation	describe th	e terms	below)							
⁴ Provide the aggregate value of additional securities of the issue rights exercisable to acquire add ⁵ Do not include deferred compe	er. Indicate the secu ditional securities o	ırity codes for all sed								er			

a) Name of person compensated and registration status											
Indicate whether the person comp	Indicate whether the person compensated is a registrant. No V Yes										
If the person compensated is an individual, provide the name of the individual.											
Full legal name of individ	lual										
Family name First given name Secondary given names											
If the person compensated is not	If the person compensated is not an individual, provide the following information.										
Full legal name of non-individual Canaccord Genuity Corp.											
Firm NRD number 9 0 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 inform	ation										
If a firm NRD number is not prov	ided in Item 8 (a), provide	e the business co	ontact information	of the pers	son beiı	ng com	pensated.				
Street address											
Municipality				Prov	/ince/S	State					=
Country			P	ostal cod	e/Zip o	code					
Email address	Telephone number								ī		
c) Relationship to issuer or investment fund manager											
Indicate the person's relationship with the issuer or investment fund manager (select all that apply). Refer to the meaning of "connected" in Part B(2) of the Instructions and the meaning of "control" in section 1.4 of NI 45-106 for the purposes of completing this section.											
Connect with the issue	Connect with the issuer or investment fund manager Insider of the issuer (other than an investment fund)										
Director or officer of the	investment fund or inve	estment fund ma	anager	Employee	of the is	ssuer o	r investme	ent fund	d man	ager	
✓ None of the above											
d) Compensation details											
Provide details of all compensation paid, or to be paid, to the person identified in Item 8(a) in connection with the distribution. Provide all amounts in Canadian dollars. Include cash commissions, securities-based compensation, gifts, discounts or other compensation. Do not report payments for services incidental to the distribution, such as clerical, printing, legal or accounting services. An issuer is not required to ask for details about, or report on, internal allocation arrangements with the directors, officers or employees of a non-individual compensated by the issuer.											
Cash commissions paid	136,800.94			Sec	curity co	de 1	Security co	ode 2	Secui	ity code	3
Value of all securities distributed as compensation	4	, 	Security codes	U	В	S	W N	Т			
•	rms of warrants, options	or other rights	Also issued 15				exercis	able in	to on	e Unit	at
Other compensation ⁵		Describe	\$0.90 until Nov	ember 10	6, 202	4.					\dashv
Total compensation paid]									
Check box if the person will or may receive any deferred compensation (describe the terms below)											
⁴ Provide the aggregate value of additional securities of the issue rights exercisable to acquire add ⁵ Do not include deferred compet	r. Indicate the security co ditional securities of the is	odes for all sect	on, <u>excluding</u> optio urities distributed a	ons, warrar as compen	nts or o nsation,	other rigi includi	hts exerci ing options	sable to s, warra	acqu ents or	iire other	

a) Name of person compe	nsated and registrat	ion status								
Indicate whether the person com	pensated is a registrant		☐ No	\checkmark	Yes					
If the person compensated is an individual, provide the name of the individual.										
Full legal name of individ	dual									
	Fami	ly name	F	irst given n	ame	Seco	ndary given nam	es		
If the person compensated is not	If the person compensated is not an individual, provide the following information.									
Full legal name of non-individual Eventus Capital Corp.										
Firm NRD number 5 2 5 2 0 (if applicable)										
Indicate whether the person compensated facilitated the distribution through a funding portal or an internet-based portal. V No Yes										
b) Business contact inform	nation									
If a firm NRD number is not prov	ided in Item 8 (a), provi	de the business co	ontact informati	on of the	person being c	ompensated.				
Street address										
Municipality				P	Province/State	9				
Country			j	Postal o	code/Zip code	•				
Email address				Telep	hone numbe	r				
c) Relationship to issuer or investment fund manager										
Indicate the person's relationship with the issuer or investment fund manager (select all that apply). Refer to the meaning of "connected" in Part B(2) of the Instructions and the meaning of "control" in section 1.4 of NI 45-106 for the purposes of completing this section.										
Connect with the issue					-		investment fun	id)		
Director or officer of the	e investment fund or in	vestment fund m	anager \Box	l Employ	vee of the issue	er or investme	ent fund manag	ier		
<u> </u>	o invocament rana or in	voormont rana m			00 01 110 1000		one rana manag	OI .		
✓ None of the above										
d) Compensation details										
Provide details of all compensation paid, or to be paid, to the person identified in Item 8(a) in connection with the distribution. Provide all amounts in Canadian dollars. Include cash commissions, securities-based compensation, gifts, discounts or other compensation. Do not report payments for services incidental to the distribution, such as clerical, printing, legal or accounting services. An issuer is not required to ask for details about, or report on, internal allocation arrangements with the directors, officers or employees of a non-individual compensated by the issuer.										
Cash commissions paid	91,200.6	33			Security code 1	Security co	ode 2 Security	code 3		
Value of all securities distributed as compensation		<u> </u>	Security codes		U B S	WN	Т			
•	rms of warrants, option	s or other rights			broker warra		able into one	Unit		
Other compensation ⁵	5	Describe	CACIOIGADIC	<u>αι φοίσο</u>	411111111111111111111111111111111111111	701 10, 202 1	· <u>·</u>			
Total compensation paid	91,200.6	3								
Check box if the person will or may receive any deferred compensation (describe the terms below)										
⁴ Provide the aggregate value of additional securities of the issue rights exercisable to acquire add ⁵ Do not include deferred compe	r. Indicate the security ditional securities of the	codes for all sec								

a) Name of person compe	ensated and regist	tration status									
Indicate whether the person com	Indicate whether the person compensated is a registrant. No Yes										
If the person compensated is an individual, provide the name of the individual.											
Full legal name of individual											
Family name First given name Secondary given names											
If the person compensated is not an individual, provide the following information.											
Full legal name of non-individual Richardson Wealth Limited											
Firm NRD number 2 1 9 7 0 (if applicable)											
Indicate whether the person compensated facilitated the distribution through a funding portal or an internet-based portal. V No Yes											
b) Business contact inform	mation										
If a firm NRD number is not pro	vided in Item 8 (a), p	rovide the business c	ontact informatio	n of the pe	erson bei	ng con	npensated.				
Street address											
Municipality				Pro	ovince/S	State					
Country			j ,	Postal co	de/Zip	code					
Email address]	Teleph	one nur	mber					
c) Relationship to issuer of	or investment fund	manager									
Indicate the person's relationship with the issuer or investment fund manager (select all that apply). Refer to the meaning of "connected" in Part B(2) of the Instructions and the meaning of "control" in section 1.4 of NI 45-106 for the purposes of completing this section.											
Connect with the issue	er or investment fund	d manager		Insider of	f the issu	uer (oth	ner than an	invest	ment t	fund)	
Director or officer of the	e investment fund o	r investment fund m	anager	Employe	e of the	issuer	or investm	ent fun	d man	ager	
✓ None of the above											
d) Compensation details											
Provide details of all compensation Canadian dollars. Include cash control incidental to the distribution, such allocation arrangements with the	ommissions, securitie h as clerical, printing e directors, officers or	s-based compensation, legal or accounting employees of a non-	on, gifts, discounts services. An issue	or other or or is not re	compens quired to	ation. L ask fo	Do not repo	ort payı	ments	for se	rvices
Cash commissions pai	d 22,80	0.16		S	Security co	de 1	Security of	ode 2	Secu	rity co	de 3
Value of all securities distributed as compensation			Security codes	L	Ј В	S	W N	Т			
•	Describe terms of warrants, options or other rights Also issued 25,333 broker warrants exercisable into one Unit at \$0.90 until November 16, 2024.										
Other compensation	5	Describe									
Total compensation pai	d 22,80	0.16									
Check box if the person will or may receive any deferred compensation (describe the terms below)											
⁴ Provide the aggregate value o additional securities of the issu rights exercisable to acquire ad ⁵ Do not include deferred compe	er. Indicate the secu Iditional securities of	rity codes for all sec	on, <u>excluding</u> opt urities distributed	ions, warr as compe	rants or c ensation,	other rig includ	ghts exerci ling option:	isable t s, warra	o acqu ants o	uire r othe	er

a) Name of person compe	ensated and regis	tration	status											
Indicate whether the person com	pensated is a regist	rant.		☐ No		\checkmark	Yes	;						
If the person compensated is an individual, provide the name of the individual.														
Full legal name of individ	dual													
		Family na	ame		First	given r	name			Se	conda	ry given	names	i
If the person compensated is not an individual, provide the following information.														
Full legal name of	Full legal name of non-individual M Partners Inc.													
Firm NRD number 2 0 3 6 0 (if applicable)														
Indicate whether the person compensated facilitated the distribution through a funding portal or an internet-based portal. V No Yes														
b) Business contact inform	nation													
If a firm NRD number is not prov	rided in Item 8 (a), p	orovide t	he business	contact info	rmation	of the	perso	n beii	ng con	npensated	1.			
Street address														
Municipality						F	Provir	nce/S	State					
Country					Р	ostal	code/	Zip d	code					
Email address						Telep	ohone	nun	nber					
c) Relationship to issuer of	r investment fun	d mana	ıger											
Indicate the person's relationship with the issuer or investment fund manager (select all that apply). Refer to the meaning of "connected" in Part B(2) of the Instructions and the meaning of "control" in section 1.4 of NI 45-106 for the purposes of completing this section.														
Connect with the issue	r or investment fun	d mana	ger			Insider	of the	e issu	er (oth	ner than a	an inv	estment	t fund))
Director or officer of the	e investment fund o	or invest	ment fund n	nanager		Employ	yee of	the i	ssuer	or investr	ment f	und ma	anagei	r
✓ None of the above														
d) Compensation details														
Provide details of all compensation Canadian dollars. Include cash continuities incidental to the distribution, such allocation arrangements with the	mmissions, securiti h as clerical, printin	es-based g, legal (d compensati or accounting	ion, gifts, dis g services. A	counts (n issuer	or othe is not	r com requir	penso ed to	ation. L ask fo	Do not re _l	oort p	ayment.	s for s	ervices
Cash commissions paid	d 68,4	00.47					Secui	rity co	de 1	Security	code 2	2 Sec	curity c	ode 3
Value of all securities distributed as compensation				Security co	odes		U	В	S	W	Т	-		
Describe te	rms of warrants, or	otions or	other rights	Also iss \$0.90 u						exercis	able	into on	ie Un	it at
Other compensation	5		Describe											
Total compensation paid	68,40	00.47												
Check box if the pers										ahta ayas	raiaah	/o to oo	~	
⁴ Provide the aggregate value of additional securities of the issue rights exercisable to acquire add ⁵ Do not include deferred compe	er. Indicate the secu ditional securities o	ırity coa	les for all sed											er

тем 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 (select	t 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 in any jurisdiction of Canada ⁶										
Provide name of reporting issuer										
Wholly owned subsidiary of a foreign public issuer ⁶										
Provide name of	foreign public issue	r						7		
Issuer distributing only eligil	ble foreign securities	and the distribution	n is to permitted clie	ents only ⁷				_		
If the issuer is at least one of the	above, do not comp	olete Item 9(a) – (d	c). Proceed to Item	10.						
⁶ An issuer is a wholly owned subsidiary of a reporting issuer or a foreign public issuer if all of the issuer's outstanding voting securities, other than securities that are required by law to be owned by its directors, are beneficially owned by the reporting issuer or the foreign public issuer, respectively. ⁷ Check this box if it applies to the current distribution even if the issuer made previous distributions of other types of securities to non-permitted clients. Refer to the definitions of "eligible foreign security" and "permitted client" in Part B(1) of the Instructions.										
If the issuer is none of the above, check this box and complete Item 9(a) - (c).										
a) Directors executive officer	s and promoters o	of the issuer								
a) Directors, executive officers 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										
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	Family name	First given name	Secondary given names				lationship to issuer elect 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 names	Residential jurisdiction of individual			p to promoter both if applicable)			
				Province or country			C)		
c) Residential address of eac	c) Residential address of each individual									
Complete Schedule 2 of this form completed report. Schedule 2 also					(a) and (b)	and at	tach to t	he		

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	Tokens.com Corp.									
Full legal name	Kiguel									
	Family name	First given name	Secondary given names							
Title	Chief Executive Officer									
Telephone number	4162583148	Email address ak@	⊉tokens.com							
Signature	/s/ Andrew Kiguel	Date 2	021 11 25							
		Y	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	So	Yvonne		Title	Securities Law Clerk				
	Family name	First given name	Secondary given names	_					
Name of company	Bennett Jones LLP								
Telephone number	4167775486	Em	ail address soy@benne	ettjones.co	om				

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.