Form 45-106F1 Report of Exempt Distribution

BCSC EDER Reference Number 8845826

ITEM 1 - REPORT TYPE									
☐ New report									
✓ Amended report If amended, provide	e filing date of report that is being amended 2019 08 30 (YYYY-MM-DD)								
ITEM 2 - PARTY CERTIFYING THE REPORT									
	guidance regarding whether an issuer is an investment fund, refer to section 1.1 of National								
Instrument 81-106 Investment Fund Continuous Disclosure and the companion policy to NI 81-106. Investment fund issuer									
✓ Issuer (other than an investment fund)									
Underwriter									
ITEM 3 - ISSUER NAME AND OTHER IDENTIFI	EIERS								
Provide the following information about the issuer, or if the i	issuer is an investment fund, about the fund.								
Full legal name Organic Flow	wer Investments Group Inc.								
Previous full legal name Q INVESTMI	MENTS LTD.								
If the issuer's name changed in the last 12 months, p	provide most recent previous legal name.								
Website	(if applicable)								
If the issuer has a legal entity identifier, provide below. Refer	er to Part B of the Instructions for the definition of "legal entity identifier".								
Legal entity identifier									
If two or more issuers distributed a single security, provide th	the full legal name(s) of the co-issuer(s) other than the issuer named above.								
Full legal name(s) of co-issuer(s)	(if applicable)								
ITEM 4 - UNDERWRITER INFORMATION									
If an underwriter is completing the report, provide the under	rwriter's full legal name and firm NRD number.								
Full legal name									
Firm NRD number	(if applicable)								
If the underwriter does not have a firm NRD number, provide	de the head office contact information of the underwriter.								
Street address									
Municipality	Province/State								
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 2 3 9 9 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 ✓ Yes If yes, provide SEDAR profile number 0 0 0 7 5 4 5									
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 Financial year-end									
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 investment 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 that most accurately identifies the issuer (select only one) .								
Money market	☐ Equity ☐ Fixed income ☐ Balanced							
Alternative strate	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								
	tive Investment of Transferable Securities funds (UCITs Funds) are investment funds regulated by the European Union of 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 forma	tion Financial year-end MM DD							
d) Reporting issuer st	atus of the investment fund							
Is the investment fund a rep	orting issuer in any jurisdication of Canada? 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 T							
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 oot a trading facility such as, for example, an automated trading system.							
Exchange on								
-	AV) of the investment fund							
	investment fund as of the date of the most recent NAV calculation (Canadian \$).							
\$0 to under \$5M	\$5M to under \$25M \$25M to under \$100M							
\$100M to under \$500	DM S500M to under \$1B S1B or over Date of NAV calculation:							
	YYYY MM DD							

ITEM 7 - INFORMATION ABOUT THE DISTRIBUTION

If an issuer located outside of Canada completes a distribution in a jurisdiction of Canada, include in Item 7 and Schedule 1 information about purchasers resident in that jurisdiction of Canada only. Do not include in Item 7 securities issued as payment of commissions or finder's fees in connection with the distribution, which must be disclosed in Item 8. The information provided in Item 7 must reconcile with the information provided in Schedule 1 of the report.

30,70	scredule 1 of the report									
a)	Currency									
Sele	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	3 dollar] Euro	Other (describe)					
b)	Distribution date(s)									
as b	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	06	10	End date	2019	06	10		
		YYYY	MM	DD		YYYY	MM	DD		

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 \$					
	ecurit code	,	CUSIP number (if applicable)	Description of security	Number of securities	Single or lowest price	Highest price	Total amount			
С	М	S	68622A102	10,000,000 common shares issued at a deemed value of \$0.36 per common share.	10,000,000.00	0.3600	0.3600	3,600,000.00			
С	М	S	68622A102	9,456,904 common shares issued at a deemed value of \$0.3701 per common share.	9,456,904.00	0.3701	0.3701	3,500,000.17			
С	М	S	68622A102	5,000,000 common shares issued at a deemed value of \$0.3744 per common share.	5,000,000.00	0.3744	0.3744	1,872,000.00			
С	М	S	68622A102	5,000,000 common shares issued at a deemed value of \$0.3744 per common share.	5,000,000.00	0.3744	0.3744	1,872,000.00			
С	М	S	68622A102	19,166,000 common shares issued at a deemed value of \$0.40 per common share.	19,166,000.00	0.4000	0.4000	7,666,400.00			
С	М	s	68622A102	9,166,000 common shares issued at a deemed value of \$0.44 per common share.	9,166,000.00	0.4400	0.4400	4,033,040.00			

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.

exc	nvertik hange curity o	able	nderlyi curity c	•	Exercise price (Canadian \$)				Describe other items (if applicable)			
					Lowest	Highest						

f) Summary of the distribution by jurisdiction and exemption

State the total dollar amount of securities distributed and the number of purchasers for each jurisdiction of Canada and foreign jurisdiction where a purchaser resides and for each exemption relied on in Canada for that distribution. However, if an issuer located outside of Canada completes a distribution in a jurisdiction of Canada, include distributions to purchasers resident in that jurisdiction of Canada only.

This table requires a separate line item for: (i) each jurisdiction where a purchaser resides, (ii) each exemption relied on in the jurisdiction where a purchaser resides, if a purchaser resides in a jurisdiction of Canada, and (iii) each exemption relied on in Canada, if a purchaser resides in a foreign jurisdiction.

For jurisdictions within Canada, state the province or territory, otherwise state the country.

Province or country	Exemption relied on	Number of unique ² purchasers	Total amount (Canadian \$)	
British Columbia	NI 45-106 2.12 [Asset acquisition]	6	5,917,551.00	
Ontario	NI 45-106 2.12 [Asset acquisition]	16	14,225,889.00	
Barbados	NI 45-106 2.12 [Asset acquisition]	1	2,400,000.00	
	Total dollar amount of securities distributed 22,543,4			
	Total number of unique purchasers ^{2b}	23		

^{2a} In calculating the number of unique purchasers per row, count each purchaser only once. Joint purchasers may be counted as one 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)

^{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.

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. 7							

a) Name of person comp	ensated and regi	stration status									
Indicate whether the person co	mpensated is a regis	trant.	✓ N	О		Yes					
If the person compensated is ar	n individual, provide	the name of the ind	ividual.								
Full legal name of indiv	vidual										
		Family name		First	t given n	name		Sec	ondary given	names	
If the person compensated is no	ot an individual, prov	ride the following in	formation.								
Full legal name	of non-individual	1132902 BC LT	D.								
F	irm NRD number						(if app	licable)			
Indicate whether the person co	mpensated facilitate	d the distribution th	ough a fui	nding port	al or ar	n intern	ப et-based ந	oortal.	✓ N	lo 🗀] Yes
b) Business contact infor	mation										
If a firm NRD number is not pro	ovided in Item 8 (a),	provide the business	contact in	formation	of the	person	being con	npensated.			
Street address	8572 212th Stree	t									
Municipality	Langley				F	Provinc	e/State	British	Columbia		
Country	Canada			Р	ostal o	code/Z	ip code	V1M 2I	E7		
Email address	lucasbirdsall@gm	nail.com			Telep	hone	number	778549	96714		
c) Relationship to issuer	or investment fun	d manager									
Indicate the person's relationsh the Instructions and the meanin	•		-					ining of "c	onnected" i	n Part B	3(2) of
Connect with the issu	•		o for the po	·	•	_		ner than ar	n investmer	nt fund)	
<u> </u>		-					`			ŕ	
Director or officer of t	ne investment tuna	or investment tund	manager	Ш	⊨mpioy	ee of t	ne issuer	or investm	ent fund m	anager	
✓ None of the above											
d) Compensation details											
Provide details of all compensate Canadian dollars. Include cash of incidental to the distribution, su allocation arrangements with the	commissions, securit ch as clerical, printir	es-based compensa g, legal or accountil	tion, gifts, ng services.	discounts An issuer	or othe	r comp require	ensation. I d to ask fo	Do not rep	ort paymen	ts for se	ervices
Cash commissions pa	aid					Securit	y code 1	Security of	code 2 Se	curity co	ode 3
Value of all securitie distributed as compensation	1012	50.00	Security	codes			и ѕ				
·		 otions or other right	s								
	erris or warrants, o										5
Other compensatio		Describ	,			ares is	ssued at	a deeme	d value of	\$0.40	۱ ا
	n ⁵	Describ	,	00 common s		ares is	ssued at	a deeme	d value of	\$0.40	
Total compensation pa	n ⁵ 101,2	Describ	per co	ommon s	hare.			a deeme	d value of	\$0.40	
Total compensation pa	n ⁵	Describ	per co	ommon s	hare.			a deeme	d value of	\$0.40	
Total compensation pa	n ⁵ 101,2	Describ	per co	ommon s	hare.			a deeme	d value of	\$0.40	

a) Name of person com	pensated and regi	stration status							
Indicate whether the person co	ompensated is a regis	trant.	✓ No	Yes	1				
If the person compensated is a	n individual, provide	the name of the indivi	dual.						
Full legal name of indi	vidual								
		Family name	Firs	st given name		Secondary	/ given name	:S	
If the person compensated is n	ot an individual, pro	vide the following info	rmation.						
Full legal name	e of non-individual	193975 Alberta Li	mited						
Firm NRD number (if applicable)									
Indicate whether the person compensated facilitated the distribution through a funding portal or an internet-based portal. Ves									
b) Business contact info	rmation								
If a firm NRD number is not pr	rovided in Item 8 (a),	provide the business c	ontact information	n of the perso	n being com	pensated.			
Street address	8572 212th Stree	t							
Municipality	Langley			Provir	nce/State	British Colu	mbia		
Country	Canada		F	Postal code/	Zip code	V1M2E7			
Email address	lucasbirdsall@gn	nail.com		Telephone	e number	7785496714	1		
c) Relationship to issue	r or investment fur	nd manager	-						
Indicate the person's relationsl the Instructions and the mean	•		-			ning of "connec	ted" in Part	: B(2) of	
Connect with the iss	•		or the purposes of			er than an inve	stment func	4)	
<u> </u>		-			,			•	
_	the investment fund	or investment fund m	anager	Employee of	the issuer o	or investment fu	na manage)r	
✓ None of the above									
d) Compensation details	5								
Provide details of all compensa Canadian dollars. Include cash incidental to the distribution, so allocation arrangements with t	commissions, securit uch as clerical, printir	ies-based compensationg, legal or accounting	on, gifts, discounts services. An issue	or other com r is not requir	pensation. D ed to ask for	o not report pa	yments for s	services	
Cash commissions p	aid			Secur	rity code 1	Security code 2	Security	code 3	
Value of all securiti	100 0	00.00	Security codes	С	M S				
•		ptions or other rights							
Other compensation	on ⁵	Describe	1,000,000 cor		es issued a	t a deemed v	alue of \$0	.40	
Total compensation p	aid 400.0	00.00	per common s	share.					
			nnoncation (doco	riba tha tarma	, bolow)				
Check box if the p	erson will of may rec	eive any deferred cor	ilperisation (desc	inde the terms	s below)				
⁴ Provide the aggregate value additional securities of the iss rights exercisable to acquire a ⁵ Do not include deferred com	suer. Indicate the sec additional securities	curity codes for all sec							

a) Name of person comp	pensated and reg	istration status							
Indicate whether the person co	ompensated is a regi	strant.	✓ No		Yes				
If the person compensated is a	n individual, provide	the name of the indivi	idual.						
Full legal name of indi	vidual								
		Family name	Firs	st given nar	me		Secondary g	jiven names	
If the person compensated is n	ot an individual, pro	vide the following info	rmation.						
Full legal name	Full legal name of non-individual 2193975 Alberta Limited								
F	Firm NRD number				(i	f appli	cable)		
Indicate whether the person co	ompensated facilitate	ed the distribution thro	ugh a funding por	tal or an i	internet-bo	ased po	ortal. 🔽	No [Yes
b) Business contact info	rmation								
If a firm NRD number is not pr	ovided in Item 8 (a),	provide the business c	ontact information	n of the pe	erson bein	g com	pensated.		
Street address	2317 Rutherford	Way SW							
Municipality	Edmonton			Pro	ovince/St	ate	Alberta		
Country	Canada		, F	Postal co	de/Zip co	ode	T6W 1P4		
Email address]	Teleph	one num	ber	7807073648		_
c) Relationship to issuer	or investment fur	nd manager	1						
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 issu	uer or investment tu	nd manager	Ц	msider of	i trie issue	er (Otrie	er than an investi	ment runa)	
Director or officer of	the investment fund	or investment fund m	anager	Employe	e of the is	suer o	r investment fund	d manager	
✓ None of the above									
d) Compensation details	3								
Provide details of all compensa Canadian dollars. Include cash incidental to the distribution, so allocation arrangements with to Cash commissions p	commissions, securi uch as clerical, printi he directors, officers	ties-based compensations, legal or accounting	on, gifts, discounts services. An issue	or other or r is not re	compensat quired to d	tion. D ask for	o not report payr	nents for se	ervices
Oddir Commissions p				S	ecurity cod	e 1	Security code 2	Security co	ode 3
Value of all securiti distributed as compensation	102	435.00	Security codes	С	М	S			
Describe	terms of warrants, of	pptions or other rights							
Other compensation	Other compensation ⁵ Describe 183,000 common shares issued at a deemed value of \$0.35 per common share and 317,000 common shares issued at a deemed value of \$0.405 per common share.							per	
Total compensation pa	aid 192,4	135.00							
Check box if the person will or may receive any deferred compensation (describe the terms below)									
⁴ Provide the aggregate value additional securities of the iss rights exercisable to acquire a ⁵ Do not include deferred comp	ruer. Indicate the sec additional securities	curity codes for all sec	on, <u>excluding</u> opti urities distributed	ions, warr as compe	rants or oti ensation, <u>i</u>	her rigi includii	hts exercisable to ing options, warra	o acquire ants or othe	er

a) Name of person com	pensated and registration status								
Indicate whether the person co	ompensated is a registrant.	✓ No Yes							
If the person compensated is a	n individual, provide the name of the individ	dual.							
Full legal name of indi	ividual Redila	Eiza							
	Family name	First given name	Secondary given names						
If the person compensated is n	not an individual, provide the following infor	mation.							
Full legal name of non-individual									
Firm NRD number (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 info	ormation								
If a firm NRD number is not p	rovided in Item 8 (a), provide the business co	ontact information of the person being com	pensated.						
Street address	#609 – 1887 Crowe Street								
Municipality	Vancouver	Province/State	British Columbia						
Country	Canada	Postal code/Zip code	V5Y 0B4						
Email address	eizaredila@gmail.com	Telephone number	7788469624						
c) Relationship to issue	r or investment fund manager								
	hip with the issuer or investment fund mana ing of "control" in section 1.4 of NI 45-106 f		ning of "connected" in Part B(2) of						
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 investment fund ma	anager Employee of the issuer	or investment fund manager						
✓ None of the above									
d) Compensation details	S								
Canadian dollars. Include cash incidental to the distribution, so	ntion paid, or to be paid, to the person identi commissions, securities-based compensatio uch as clerical, printing, legal or accounting the directors, officers or employees of a non-	n, gifts, discounts or other compensation. L services. An issuer is not required to ask fo	Do not report payments for services						
Cash commissions p	paid	Security code 1	Security code 2 Security code 3						
Value of all securit distributed as compensati	350 362 201	Security codes C M S							
·	terms of warrants, options or other rights								
Other compensation	on ⁵ Describe	945,690 common shares issued at a common share.	a deemed value of \$0.38 per						
Total compensation p	359,362.20								
Check box if the p	erson will or may receive any deferred con	npensation (describe the terms below)							
additional securities of the iss	of all securities distributed as compensations of all security codes for all securations of the issuer. Indicate the security codes for all securational securities of the issuer.	on, <u>excluding</u> options, warrants or other rig urities distributed as compensation, <u>includ</u>	ghts exercisable to acquire <u>Ving</u> options, warrants or other						

a) Name of person com	pensated and regi	stration status								
Indicate whether the person co	ompensated is a regis	trant.	✓ No	Yes						
If the person compensated is a	n individual, provide	the name of the indivi	dual.							
Full legal name of indi	vidual									
		Family name	Firs	st given name		Seconda	ıry given name	es .		
If the person compensated is n	ot an individual, pro	vide the following infor	mation.							
Full legal name	e of non-individual	Fish Law Professi	onal Law Corp	oration						
Firm NRD number (if applicable)										
Indicate whether the person co	Indicate whether the person compensated facilitated the distribution through a funding portal or an internet-based portal. Ves									
b) Business contact info	rmation									
If a firm NRD number is not pr	ovided in Item 8 (a),	provide the business c	ontact informatio	n of the person i	being com	pensated.				
Street address	2-48A Dewson S	treet								
Municipality	Toronto			Provinc	e/State	Ontario				
Country	Canada		F	Postal code/Zi	ip code	M6H1G7				
Email address	mfish@fishlpc.co	m		Telephone i	number	905781878	36			
c) Relationship to issue	or investment fur	d manager								
Indicate the person's relationsl the Instructions and the mean	•		-			ning of "conne	cted" in Par	t B(2) of		
Connect with the iss	•			Insider of the is		er than an inv	estment fun	d)		
<u> </u>		or investment fund ma	anager \square	Employee of the	•			,		
✓ None of the above			age:	p.o, oo o. a			ana manag			
d) Compensation details		:	··· · · · · · · · · · · · · · · · · ·	. ,.			. , ,,			
Provide details of all compensa Canadian dollars. Include cash										
incidental to the distribution, su allocation arrangements with t	uch as clerical, printir	ng, legal or accounting	services. An issue	er is not required	d to ask for					
Cash commissions p			individual compe							
Value of all securiti				Security C N		Security code 2	2 Security	code 3		
distributed as compensation	12/19	556.00	Security codes	C	И S					
Describe	terms of warrants, o	ptions or other rights								
Other compensation	on ⁵	Describe	333,000 comper common		sued at a	a deemed va	lue of \$0.4	.05		
Total compensation p	aid 134,8	56.00	[For some							
Check box if the p	erson will or may red	eive any deferred cor	npensation (desc	ribe the terms b	pelow)					
_										
⁴ Provide the aggregate value additional securities of the iss										
rights exercisable to acquire a 5Do not include deferred com	additional securities			·						

a) Name of person comp	pensated and reg	istration status						
Indicate whether the person co	ompensated is a regi	strant.	✓ No	Y	′es			
If the person compensated is a	n individual, provide	the name of the indiv	idual.					
Full legal name of indi	vidual							
		Family name	Firs	st given nam	ne	Secondary of	jiven names	
If the person compensated is n	ot an individual, pro	vide the following info	rmation.					
Full legal name	e of non-individual	Intercontinental A	dvisory Corp.					
F	Firm NRD number				(if appl	icable)		
Indicate whether the person co	ompensated facilitate	ed the distribution thro	ugh a funding por	tal or an in	 nternet-based p	oortal. 🗸] No 🔲	Yes
b) Business contact info	rmation							
If a firm NRD number is not pr	rovided in Item 8 (a),	provide the business o	ontact information	n of the pe	rson being com	pensated.		
Street address	Suite 810-789 W	est Pender Street						
Municipality	Vancouver			Pro	ovince/State	British Colum	bia	
Country	Canada		, F	Postal cod	de/Zip code	V6C1H2		
Email address	wgbirdsall@gma	il.com		Telepho	one number	7788096664		
c) Relationship to issuer	r or investment fur	nd 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	uer or investment tu	nd manager	Ц	msider of	the issuer (oth	er than an invest	ment iuna)	
Director or officer of	the investment fund	or investment fund m	anager	Employee	e of the issuer of	or investment fun	d manager	
✓ None of the above								
d) Compensation details	3							
Provide details of all compensa Canadian dollars. Include cash incidental to the distribution, so allocation arrangements with to Cash commissions p	commissions, securi uch as clerical, printi he directors, officers	ties-based compensations, legal or accounting	on, gifts, discounts services. An issue	or other cor r is not req	ompensation. E quired to ask fo	Do not report payr	ments for sei	rvices
Casii commissions p	l'aiu			Se	ecurity code 1	Security code 2	Security cod	de 3
Value of all securiti distributed as compensation	610 (950.00	Security codes	С	M S			
Describe	terms of warrants, of	pptions or other rights						
Other compensation	Other compensation ⁵ Describe 717,000 common shares issued at a deemed value of \$0.35 per common share. 1,000,000 common shares issued at a deemed value of \$0.36 per common share.							
Total compensation p	aid 610,9	950.00						
Check box if the person will or may receive any deferred compensation (describe the terms below)								
⁴ Provide the aggregate value additional securities of the iss rights exercisable to acquire a ⁵ Do not include deferred com	suer. Indicate the sec additional securities	curity codes for all sec	ion, <u>excluding</u> optr curities distributed	ions, warra as compe	ants or other rig ensation, <u>includ</u>	ghts exercisable t ling options, warra	o acquire ants or othe	r.

a) Name of person comp	ensated and regis	stration status							
Indicate whether the person cor	npensated is a regis	trant.	✓ No		Yes				
If the person compensated is an	individual, provide	the name of the indiv	ridual.						
Full legal name of indiv	idual								
		Family name		First given	name		Secor	ndary given r	ames
If the person compensated is no	t an individual, prov	ide the following info	rmation.						
Full legal name	of non-individual	Slam Dash Holdi	ngs Ltd.						
Firm NRD number (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 infor	mation								
If a firm NRD number is not pro	ovided in Item 8 (a),	provide the business	contact inforr	nation of the	e person be	eing com	pensated.		
Street address	2-48A Dewson St	reet							
Municipality	Toronto				Province	/State	Ontario		
Country	Canada			Postal	code/Zip	code	M6H1G7	7	
Email address	brendan@purdyla	aw.ca		Tele	phone nu	umber	4162583	8059	
c) Relationship to issuer	or investment fun	d manager							
Indicate the person's relationshi the Instructions and the meanin	•		-				ning of "coi	nnected" in	Part B(2) of
Connect with the issu	•		for the purpo		_		er than an i	investment	fund)
<u> </u>		-		_		,			,
Director or officer of the	ne investment fund	or investment fund n	nanager	Emplo	oyee of the	s issuer c	or investme	nt fund mai	nager
✓ None of the above									
d) Compensation details									
Provide details of all compensate Canadian dollars. Include cash c incidental to the distribution, suc allocation arrangements with th	rommissions, securiti ch as clerical, printin	es-based compensati g, legal or accountin	on, gifts, disc g services. An	ounts or oth issuer is no	er compen t required t	sation. D to ask for	o not repor	t payments	for services
Cash commissions pa	iid				Security of	code 1	Security co	de 2 Secu	urity code 3
Value of all securitie distributed as compensatio	200 0	00.00	Security cod	les	СМ	S			
·		 otions or other rights							
Other compensation	n ⁵	Describe	1.,000,00	0 common		ssued a	t a deeme	d value of	\$0.38
Total compensation pa	id 380,0	00.00	perconn	non share.	•				
Check box if the pe	rson will or may rec	eive any deferred co	mpensation	describe th	e terms be	elow)			
⁴ Provide the aggregate value of additional securities of the issu- rights exercisable to acquire ac ⁵ Do not include deferred comp	ier. Indicate the sec dditional securities d	urity codes for all se							

тем 9 - Directors, Execu	TIVE OFFICERS	AND PROMOT	ERS OF THE ISS	SUER					
If the issuer is an investment fund	d, do not complete l	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 nan	ne of reporting issue	r						7	
Wholly owned subsidiary of	a foreign public issu	uer 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 b	ox and complete	Item 9(a) - (c).						
a) Directors executive officer	e and promoters of	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									
territory; otherwise state the country.							province		
Organization or company name	Family name	First given name	Secondary given names			elationship 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			to promo		
				Province or country	D		C)	
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	Organic Flower Investments Group Inc.							
Full legal name	van der Linde							
	Family name	First given name	Secondary given names					
Title	Director							
Telephone number	6046872038	Email address	theo@pashleth.com					
Signature	"THEO VAN DER LINDE"		2019 08 30					
			YYYY MM DD					

ITEM 11- CONTACT F	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	Lacson	Nicole			Title	Corporate Advisor			
	Family name	First given name	Secondary (given names					
Name of company	Partum Advisory Services Corp.								
Telephone number	6046872038	E	mail address	nlacson@pa	artumadv	isory.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.