# Form 45-106F1 Report of Exempt Distribution

BCSC EDER Reference Number 10068691

| ITEM 1 - REPORT TYPE  |                          |             |           |              |         |            |           |                 |                            |                        |
|---|--------------------------|-------------|-----------|--------------|---------|------------|-----------|-----------------|----------------------------|------------------------|
| New report  |                          |             |           |              |         |            |           |                 |                            |                        |
| Amended report  | If amen                  | ded, pro    | vide fi   | ling dat     | e of I  | report     | that is   | being ame       | ended 2023 02 (            | 06 (YYYY-MM-DD)        |
| ITEM 2 - PARTY CERTIFYING THE REPORT  |                          |             |           |              |         |            |           |                 |                            |                        |
| Indicate the party certifying the r<br>Instrument 81-106 Investment Fu  |                          |             |           |              |         |            |           |                 | restment fund, refer to s  | ection 1.1 of National |
| Investment fund issuer  |                          |             |           |              |         |            |           |                 |                            |                        |
| ✓ Issuer (other than a  | an invest                | ment fur    | nd)       |              |         |            |           |                 |                            |                        |
|   |                          |             | - /       |              |         |            |           |                 |                            |                        |
|   |                          |             |           |              |         |            |           |                 |                            |                        |
| Item 3 - Issuer Name a  | ND OTH                   | HER IDEI    | NTIFIE    | RS           |         |            |           |                 |                            |                        |
| Provide the following information   |                          | r           |           | suer is an   | invest  | ment fu    | nd, abou  | it the fund.    |                            |                        |
| Full lega   | al name                  | Legible     | Inc.      |              |         |            |           |                 |                            |                        |
| Previous full lega  | Previous full legal name |             |           |              |         |            |           |                 |                            |                        |
| If the issuer's name chan   | nged in the              | last 12 mc  | onths, pr | ovide mos    | st rece | ent previ  | ous lega  | l name.         |                            |                        |
| \<br>\  | Website                  | www.le      | gible.c   | om           |         |            |           | (if applicabl   | e)                         |                        |
| If the issuer has a legal entity ide  | ntifier, pro             | vide below  | . Refer t | o Part B o   | f the l | Instructio | ons for t | he definition o | of "legal entity identifie | - <i>"</i> .           |
| Legal entity id   | dentifier                |             |           |              |         |            |           |                 |                            |                        |
| If two or more issuers distributed  | a single se              | curity, pro | vide the  | full legal   | name    | (s) of th  | e co-issu | ıer(s) other th | an the issuer named ab     | ove.                   |
| Full legal name(s) of co-is   | ssuer(s)                 |             |           |              |         |            |           | (if applicable  | e)                         |                        |
|   |                          |             |           |              |         |            |           |                 |                            |                        |
| ITEM 4 - UNDERWRITER I  | NFORM                    | ATION       |           |              |         |            |           |                 |                            |                        |
| If an underwriter is completing th  | ne report, p             | rovide the  | underw    | riter's full | legal   | name a     | nd firm l | NRD number.     |                            |                        |
| Full legal name   |                          |             |           |              |         |            |           |                 |                            |                        |
| Firm NRD number   | r (if applicable)        |             |           |              |         |            |           |                 |                            |                        |
| If the underwriter does not have a firm NRD number, provide the head office contact information of the underwriter. |                          |             |           |              |         |            |           |                 |                            |                        |
| Street address  |                          |             |           |              |         |            |           |                 |                            |                        |
| Municipality  |                          |             |           |              |         |            | Prov      | 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 1 1 1 3 0   |  |  |  |  |  |  |  |  |  |
| If the issuer is in the <b>mining industry</b> , 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       5       1       3       8   |  |  |  |  |  |  |  |  |  |
| 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.   |  |  |  |  |  |  |  |  |  |
| All AB BC MB NB NL NT   |  |  |  |  |  |  |  |  |  |
| 🗌 NS 🗌 NU 🗌 ON 🗌 PE 🗌 QC 🔲 SK 🗌 YT  |  |  |  |  |  |  |  |  |  |
| g) Public listing status  |  |  |  |  |  |  |  |  |  |
| If the issuer has a CUSIP number, provide below (first 6 digits only)   |  |  |  |  |  |  |  |  |  |
| CUSIP number  |  |  |  |  |  |  |  |  |  |
| If the issuer is publicly listed, provide the name of the exchange on which the issuer's equity securities primarily trade. Provide only the name of an exchange and not a trading facility such as, for example, an automated trading system.  |  |  |  |  |  |  |  |  |  |
| Exchange name   |  |  |  |  |  |  |  |  |  |
| h) Size of issuer's assets  |  |  |  |  |  |  |  |  |  |
| Select the size of the issuer's assets based on its most recently available annual financial statements (Canadian \$). If the issuer has not prepared annual financial statements for its first financial year, provide the size of the issuer's assets at the distribution end date.               |  |  |  |  |  |  |  |  |  |

| \$0 to under \$5M     | \$5M to under \$25M | □ \$25M to under \$100M |
|-----------------------|---------------------|-------------------------|
| S100M to under \$500M | S500M to under \$1B | S1B or over             |

| 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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| Date of formation Financial year-end   YYYY MM   Financial year-end MM MM DD  MM DD MM Pes MB   |
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| CUSIP number  |
|   |
| name of an exchange and not a trading facility such as, for example, an automated trading system  |
|   |
| Exchange name   |
| f) Net asset value (NAV) of the investment fund   |
| Select the NAV range of the investment fund as of the date of the most recent NAV calculation (Canadian \$).  |
| L L \$\the under \$\mathbf{S}M \qquad L \qquad \mathbf{S}M \text{ to under \$\mathbf{S}M \qquad \text{ to under \$\mathbf{S}M \qquad \text{to under \$\mathbf{S}M |
| \$0 to under \$5M       \$5M to under \$25M       \$25M to under \$100M         \$100M to under \$500M       \$500M to under \$1B       \$1B or over       Date of NAV calculation:   |

| EM 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<br>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<br>connection with the distribution, which must be disclosed in Item 8. The information provided in Item 7 must reconcile with the information provided in<br>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)<br>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<br>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<br>distribution period covered by the report.  |  |  |  |  |  |  |  |  |  |  |
| Start date         2023         02         02         End date         2023         02         02   |  |  |  |  |  |  |  |  |  |  |
| 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 \$   |  |  |  |  |  |  |  |  |  |  |
| Single or   |  |  |  |  |  |  |  |  |  |  |
| Security<br>code         CUSIP number<br>(if applicable)         Description of security         Number of<br>securities         Number of<br>lowest<br>price         Highest price         Total amount  |  |  |  |  |  |  |  |  |  |  |
| U     B     S     \$0.11/Unit comprised of 1 Share<br>& 1 Warrant, each Warrant entitle<br>to purchase 1 Warrant Share @<br>\$0.15 from issuance date of the<br>Units; at any time on the date that<br>is 1 year with triggering event     3,982,727.00     0.1100     0.1100     438,100.00  |  |  |  |  |  |  |  |  |  |  |
| 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.  |  |  |  |  |  |  |  |  |  |  |
| Convertible /<br>exchangeable<br>security code         Underlying<br>security code         Exercise price<br>(Canadian \$)         Expiry date<br>(YYYY- MM-DD)         Conversion<br>ratio         Describe other items (if applicable)  |  |  |  |  |  |  |  |  |  |  |
| Lowest     Highest       Image: Lowest     Highest       Image: Lowest     Highest       Image: Lowest     0.1500       Image: Lowest     If volume weighted average trading price on CSE is at least \$0.45/share for 5 consecutive trading days, expiry date of trading days, expiry days, expiry date of trading days, expiry days, ex |  |  |  |  |  |  |  |  |  |  |
| N       T       C       M       S       2024-02-02       trading days, expiry date of<br>Warrant can be accelerated to<br>not less than 21 days for notice<br>provided by news release.   |  |  |  |  |  |  |  |  |  |  |
| f) Summary of the distribution by jurisdiction and exemption  |  |  |  |  |  |  |  |  |  |  |
| 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<br>country | Exemption relied on                                     | Number of unique <sup>29</sup><br>purchasers | Total amount (Canadian \$) |
|------------------------|---|--|----------------------------|
| Alberta                | NI 45-106 2.3 [Accredited investor]                     | 7  | 138,600.00                 |
| British Collimnia      | NI 45-106 2.5 [Family, friends and business associates] | 2  | 18,000.00                  |

|               | Total number of unique purchasers <sup>2b</sup> | 14                   |            |
|---------------|---|----------------------|------------|
|               | Total dollar amount of se                       | curities distributed | 438,100.00 |
| Bahamas       | NI 45-106 2.3 [Accredited investor]             | 1                    | 33,000.00  |
| Ontario       | NI 45-106 2.3 [Accredited investor]             | 1                    | 5,500.00   |
| United States | NI 45-106 2.3 [Accredited investor]             | 3                    | 243,000.00 |

<sup>2a</sup> In calculating the number of unique purchasers per row, count each purchaser only once. Joint purchasers may be counted as one purchaser.

<sup>2b</sup> 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.<sup>3</sup> 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<br>(Canadian \$) |
|---|-------------------------------|
|   |                               |
| Total net proceeds to the investment fund |                               |

<sup>3</sup>"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<br>other material<br>(YYYY-MM-DD) | Previously filed<br>with or delivered to<br>regulator?<br>(Y/N) | Date previously filed or<br>delivered<br>(YYYY-MM-DD) |
|-------------|---|---|---|
|             |   |   |   |

| ITEM 8 - COMPENSATIO   | N INFORMATION  |                                   |   |   |   |
|--|--|-----------------------------------|---|---|---|
| Provide information for each pe<br>the distribution. <b>Complete ad</b>  |  |                                   | • •   |   | ny compensation in connection with <b>ed.</b>   |
| Indicate whether any compen-   | sation was paid, or will be p  | aid, in connecti                  | on with the distribution                                |   |   |
| 🗌 No 🗹 Yes   | If yes, indicate nu  | mber of perso                     | ons compensated.  | 1   |   |
| a) Name of person comp   | pensated and registration  | n status                          |   |   |   |
| Indicate whether the person co   | mpensated is a registrant.   |                                   | ✓ No  | Yes   |   |
| If the person compensated is an  | n individual, provide the nar  | ne of the individ                 | lual.   |   |   |
| Full legal name of indiv   | <i>r</i> idual   |                                   |   |   |   |
|  | Family   | name                              | First given   | name  | Secondary given names   |
| If the person compensated is no  |  | -                                 | mation.   |   |   |
| Full legal name  | of non-individual Retire   | e First Ltd.                      |   |   |   |
| F  | irm NRD number   |                                   |   | (if appl                                    | icable)   |
| Indicate whether the person co   | mpensated facilitated the di   | stribution throu                  | gh a funding portal or o                                | an internet-based p                         | oortal. 🖌 No 🗌 Yes  |
| b) Business contact info   | rmation  |                                   |   |   |   |
| If a firm NRD number is not pro  |  | the business co                   | ntact information of th                                 | e person being com                          | ppensated.  |
| Street address   | 101-4610 49 Ave  |                                   |   |   |   |
| Municipality   | Red Deer   |                                   |   | Province/State                              | Alberta   |
| Country  | Canada   |                                   | Postal  | code/Zip code                               | T4N 6M5   |
| Email address  | scott.allan@retirefirst.co   | om                                | Tele  | phone number                                | 4033149157  |
| c) Relationship to issuer  | or investment fund man   | ager                              |   |   |   |
| Indicate the person's relationsh the Instructions and the meaning the the meaning the mean |  |                                   |   |   | ning of "connected" in Part B(2) of   |
| Connect with the issu  | ier or investment fund man   | ager                              | Inside  | er of the issuer (oth                       | er than an investment fund)   |
| Director or officer of t   | he investment fund or inve   | stment fund ma                    | inager 🗌 Emplo  | oyee of the issuer of                       | or investment fund manager  |
| ✓ None of the above  |  |                                   |   |   |   |
| d) Compensation details  |  |                                   |   |   |   |
| Canadian dollars. Include cash o<br>incidental to the distribution, su<br>allocation arrangements with th  | commissions, securities-base<br>ch as clerical, printing, lega<br>ne directors, officers or empl | ed compensatio<br>l or accounting | n, gifts, discounts or oth<br>services. An issuer is no | er compensation. L<br>t required to ask for | tribution. Provide all amounts in<br>Do not report payments for services<br>r details about, or report on, internal |
| Cash commissions pa  | aid 2,420.00   |                                   |   | Security code 1                             | Security code 2 Security code 3   |
| Value of all securitie<br>distributed as compensatio   |  | 5                                 | Security codes  | W N T                                       |   |
| Describe   | erms of warrants, options of   | or other rights                   | Finder's Warrant - 2                                    | 22,000 exercisab                            | ble at \$0.15   |
| Other compensatio  | n <sup>5</sup>   | Describe                          |   |   |   |
| Total compensation pa  | iid  |                                   |   |   |   |
| Check box if the pe  | erson will or may receive an   | y deferred com                    | pensation (describe th                                  | e terms below)                              |   |
|  |  |                                   |   |   |   |
| <sup>4</sup> Provide the aggregate value of  | of all securities distributed a  | as compensatio                    | on, excludina options w                                 | varrants or other ric                       | ahts exercisable to acquire   |
| additional securities of the issu<br>rights exercisable to acquire a<br><sup>5</sup> Do not include deferred comp  | uer. Indicate the security co<br>dditional securities of the is                                  | 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 of the following (select the one that applies - if more than one applies, select only one).  |  |   |   |  |             |           |            |    |  |
| ✓ Reporting issuer in any jurisdiction of Canada  |  |   |   |  |             |           |            |    |  |
| Foreign public issuer   |  |   |   |  |             |           |            |    |  |
| Wholly owned subsidiary of a reporting issuer in any jurisdiction of Canada <sup>6</sup>  |  |   |   |  |             |           |            |    |  |
| Provide name of reporting issuer  |  |   |   |  |             |           |            |    |  |
| Wholly owned subsidiary of  | a foreign public issu  | ier <sup>6</sup>                            |   |  |             |           |            | -  |  |
| Provide name of   | foreign public issue   | r   |   |  |             |           |            | ]  |  |
| 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.  |             |           |            |    |  |
| <sup>6</sup> An issuer is a wholly owned subsid<br>securities that are required by law to<br>respectively.<br><sup>7</sup> Check this box if it applies to the cu<br>clients. Refer to the definitions of "e  | be owned by its dir<br>urrent distribution evo   | ectors, are benefic<br>en if the issuer mad | ially owned by the re<br>le previous distributi | porting issuer or t<br>ions of other types | the foreign | public is | ssuer,     |    |  |
| If the issuer is none of the  |  |   |   |  |             |           |            |    |  |
| a) Directors, executive officer   | s and promoters o  | of the issuer                               |   |  |             |           |            |    |  |
| Provide the following information for   | each director, execu   | tive officer and pro                        |   |  |             | tate the  | province   | or |  |
| Organization or company name  | 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 name         Business location of non-individual or residentail jurisdiction of individual       Relationship to issuer (select all that apply) |   |   |  |             |           |            |    |  |
|   |  |   |   | Province or                                | country     | D         | 0          | Р  |  |
|   |  |   |   |  |             |           |            |    |  |
| b) Promoter information   |  |   |   |  |             |           |            |    |  |
| If the promoter listed above is not an individual, provide the following information for each director and executive officer of the promoter. For locations within Canada, state the province or territory; otherwise state the country. For "Relationship to promoter", "D" – Director, "O" – Executive Officer. |  |   |   |  |             |           |            |    |  |
| Organization or company name  | e Family name First given name Secondary given names Residential Jurisdiction of individual Relationship to promote  |   |   |  |             |           |            |    |  |
|   |  |   |   | Province or<br>country                     |             |           | 0          |    |  |
|   |  |   |   |  |             |           |            |    |  |
| c) Residential address of eac   |  |   | · · · · · · ·                                   |  |             |           |            |    |  |
| Complete Schedule 2 of this form<br>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/<br>investment fund manager/agent | egible Inc.                     |                             |                       |            |    |  |  |  |  |
|--|---------------------------------|-----------------------------|-----------------------|------------|----|--|--|--|--|
| Full legal name  | Hainsworth                      | lainsworth Kaleeg           |                       |            |    |  |  |  |  |
|  | Family name                     | ·                           | Secondary given names |            |    |  |  |  |  |
| Title  | President, CEO and Director     | President, CEO and Director |                       |            |    |  |  |  |  |
| Telephone number   | 7788740198                      | Email address               | kaleeg@               | legible.co | om |  |  |  |  |
| Signature  | (signed) "Kaleeg<br>Hainsworth" | Date                        | 2023                  | 02         | 13 |  |  |  |  |
|  | Tallisworth                     |                             | YYYY                  | MM         | DD |  |  |  |  |

# **ITEM 11- CONTACT PERSON**

Provide the following business contact information for the individual that the securities regulatory authority or regulator may contact with any questions regarding the contents of this report, if different than the individual certifying the report in Item 10.

Same as individual certifying the report

| Full legal name  | Кау                    | Catherine        |               |              | Title     | Associate Counsel |
|------------------|------------------------|------------------|---------------|--------------|-----------|-------------------|
|                  | Family name            | First given name | Secondary     | given names  |           |                   |
| Name of company  | DLA Piper (Canada) LLF | )                |               |              |           |                   |
| Telephone number | 4036988712             |                  | Email address | catherine.ka | ıy@dlapij | per.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.