# Form 45-106F1 Report of Exempt Distribution

BCSC EDER Reference Number 9098298

ITEM 1 - REPORT TYPE											
✓ New report											
Amended report	If ame	nded, pro	vide f	iling da	te of	report	that is	being ame	ended		) (YYYY-MM-DD)
ITEM 2 - PARTY CERTIF	YING TH	e Repor	Т								
Indicate the party certifying the Instrument 81-106 Investment									estment fund,	refer to secti	on 1.1 of National
Investment fund i	ssuer										
✓ Issuer (other than	n an inve	stment fu	nd)								
ITEM 3 - ISSUER NAME											
Provide the following informat						tment fu	nd, abou	it the fund.			
	egal name		IOCKCN	ain Coi	rp.						
Previous full le	egal name										
If the issuer's name ch	anged in th	e last 12 m	onths, pi	rovide ma	ost rece	ent previ	ous legal	l name.			
	Website	www.aę	gileblo	ckchair	n.ca			(if applicable	e)		
If the issuer has a legal entity i	identifier <u>,</u> pl	ovide below	. Refer t	to Part B	of the l	Instructio	ons for th	ne definition o	of "legal entity	∕ identifier″.	
Legal entity	dentifier										
If two or more issuers distribut	ed a single	security, pro	vide the	e full lega	l name	e(s) of the	e co-issu	er(s) other th	an the issuer i	named above	<u>.</u>
Full legal name(s) of co	o-issuer(s)							(if applicable	e)		
ITEM 4 - UNDERWRITE	r Infori	MATION									
If an underwriter is completing	the report,	provide the	underw	riter's ful	l legal	name al	nd firm N	NRD number.			7
Full legal name											
Firm NRD number							(if app	licable)			
If the underwriter does not hav	ve a firm NH	D number,	provide	the head	office	contact	informat	ion of the un	derwriter.		
Street address											]
Municipality							Provi	nce/State			
Country						Post	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 2 1 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 Ves If yes, provide SEDAR profile number 0 0 0 4 5 0 5 3
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 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 NI 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

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 mane	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	t fund
Type of investment fund the	nt most accurately identifies the issuer (select only one) .
Money market	Equity Fixed income Balanced
Alternative strateg	jies 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 Fund	
	tive Investment of Transferable Securities funds (UCITs Funds) are investment funds regulated by the European Union 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
d) Departing issues at	YYYY MM DD MM DD
	atus of the investment fund
	porting issuer in any jurisdication of Canada? No Yes
	s of Canada in which the investment fund is a reporting issuer.
	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 n	ame
f) Net asset value (NA	AV) of the investment fund
Select the NAV range of the	investment fund as of the date of the most recent NAV calculation (Canadian \$).
\$0 to under \$5M	S5M to under \$25M \$25M to under \$100M
\$100M to under \$50	0M S500M to under \$1B \$1B or over Date of NAV calculation:
	YYYY MM DD

# **ITEM 7 - INFORMATION ABOUT THE DISTRIBUTION**

purchasers resident in that jurisdi	nada completes a distribution in a jur iction of Canada only. Do not include which must be disclosed in Item 8. Th	e in Item 7 securities issu	ied as paymer	nt of co	ommis	sions or fi	nder's fees in
a) Currency							
Select the currency or currencies i	in which the distribution was made. A	All dollar amounts provi	ided in the rep	ort mu	ıst be i	in Canadi	an dollars.
Canadian dollar	US dollar Euro	Other (descril	be)				
b) Distribution date(s)							
	nd dates. If the report is being filed fo If the report is being filed for securitie e report.						
Start da	<sup>ite</sup> 2020 04 15	End d	<sup>ate</sup> 2020	0	)4	15	
	YYYY MM DD		YYYY	M	1M	DD	
c) Detailed purchaser info	rmation						
Complete Schedule 1 of this	s form for each purchaser and	attach the schedule	e to the com	plete	d rep	oort.	
d) Types of securities distr	ributed						
	n for all distributions reported on a po ISIP number, indicate the full 9-digit						ow to indicate the
					C	Canadian \$	
Security code CUSIP number (if applicable)	Description of security	Number of securities	Single o lowest price		Highe	est price	Total amount
	nmon Shares in the capital o Company.	f 4,786,700.0	0.1	500			718,005.05
e) Details of rights and cor	nvertible/exchangeable securitie	es					
were distributed, provide the con	ns) were distributed, provide the exer aversion ratio and describe any other						xchangeable securities
Convertible / exchangeable Underlying security code security code	Exercise price (Canadian \$)	Expiry date (YYYY- MM-DD)	Conversion ratio		Describe other items (if applicable)		
	Lowest Highest						
	tion by jurisdiction and exemption			-			
purchaser resides and for each ex distribution in a jurisdiction of Ca This table requires a separate line purchaser resides, if a purchaser i jurisdiction.	securities distributed and the number xemption relied on in Canada for tha anada, include distributions to purcho e item for: (i) each jurisdiction where resides in a jurisdiction of Canada, an state the province or territory, otherw	t distribution. However, asers resident in that jur a purchaser resides, (ii) nd (iii) each exemption i	if an issuer loo isdiction of Ca each exemptio	cated o inada o on relie	outside only. ed on i	e of Canac	la completes a sdiction where a
Province or country	Exemption reliec	d on		Number of unique <sup>28</sup> purchasers		Total ar	mount (Canadian \$)
British Columbia	NI 45-106 2.3 [Accredited in	nvestor]			2		178,005.00
Ontario	Ontario NI 45-106 2.3 [Accredited investor]				6		340,000.05
Panama NI 45-106 2.3 [Accredited investor] 1					1		200,000.00
	To	tal dollar amount of s	ecurities dist	tribute	ed		718,005.05
	Total number o	of unique purchasers <sup>2</sup>	b		9		
<sup>2a</sup> In calculating the number of u	inique purchasers per row, count each	h purchaser only once. J	oint purchaser	rs may	be co	unted as a	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 (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 other material (YYYY-MM-DD)	Previously filed with or delivered to regulator? (Y/N)	Date previously filed or delivered (YYYY-MM-DD)

ITEM 8 - COMPENSATION	NFORMATION				
Provide information for each perso the distribution. <b>Complete additi</b>					any compensation in connection with i <b>ted.</b>
Indicate whether any compensation	on was paid, or will be paid,	in connectio	on with the distributio	n.	
✓ No 🗌 Yes	If yes, indicate numbe	er of perso	ns compensated.		
a) Name of person compen-	sated and registration st	atus			
Indicate whether the person compe	nsated is a registrant.		No [	Yes	
If the person compensated is an inc	lividual, provide the name c	of the individ	lual.		
Full legal name of individu	al				
	Family name	e	First give	en name	Secondary given names
If the person compensated is not a	ו individual, provide the foll	owing inforr	nation.		
Full legal name of	non-individual				
Firm	NRD number			(if app	blicable)
Indicate whether the person compe	ensated facilitated the distrik	ution throu	ah a fundina portal or		portal. No Yes
b) Business contact informa					
If a firm NRD number is not provid		husiness co	ntact information of t	he person heina coi	mnensated
Street address					
				Province/State	
Municipality			_		
Country			Posta	al code/Zip code	
Email address			Те	lephone number	
c) Relationship to issuer or	nvestment fund manage	er			
Indicate the person's relationship w the Instructions and the meaning c					raning of "connected" in Part B(2) of
Connect with the issuer of	or investment fund manage	r	Insic	der of the issuer (ot	her than an investment fund)
Director or officer of the i	nvestment fund or investme	ent fund ma	nager 🗌 Emp	loyee of the issuer	or investment fund manager
None of the above					
d) Compensation details					
	missions, securities-based co as clerical, printing, legal or o	ompensation accounting :	n, gifts, discounts or ot services. An issuer is n	ther compensation. ot required to ask f	stribution. Provide all amounts in Do not report payments for services for details about, or report on, internal
Cash commissions paid				Security code 1	Security code 2 Security code 3
Value of all securities distributed as compensation <sup>4</sup>		S	ecurity codes		
Describe term	ns of warrants, options or ot	ther rights			
Other compensation <sup>5</sup>		Describe			
Total compensation paid					
Check box if the perso	n will or may receive any de	eferred com	pensation (describe t	he terms below)	
<sup>4</sup> Provide the aggregate value of a					
additional securities of the issuer. rights exercisable to acquire addit <sup>5</sup> Do not include deferred compens	ional securities of the issue		rities distributed as co	ompensation, <u>inclu</u>	<u>ding</u> options, warrants or other

ITEM 9 - DIRECTORS, EXECL	JTIVE OFFICERS	AND PROMOT	ERS OF THE ISS	UER					
If the issuer is an investment fun	d, do not complete	Item 9. Procced to	Item 10.						
Indicate whether the issuer is any c	of the following (seled	ct the one that applie	es - if more than one	applies, select onl	y one).				
Reporting issuer in any juri	sdiction of Canada								
Foreign public issuer									
Wholly owned subsidiary o	f a reporting issuer i	n any jurisdiction of	Canada <sup>6</sup>						
Provide nai	me of reporting issue	er						7	
Wholly owned subsidiary o	f a foreign public iss	suer <sup>6</sup>							
Provide name o	f foreign public issue	er						7	
Issuer distributing only elig	ible foreign securitie	s and the distributio	n is to permitted clie	nts only7					
If the issuer is at least one of the	-			-					
<sup>6</sup> An issuer is a wholly owned subsic securities that are required by law t respectively. <sup>7</sup> Check this box if it applies to the c clients. Refer to the definitions of "e	to be owned by its di current distribution ev	irectors, are beneficiven if the issuer mach	ially owned by the re le previous distributi	porting issuer or i ons of other types	the foreign	public is	ssuer,		
$\checkmark$ If the issuer is none of the	e above, check this	box and complete I	tem 9(a) - (c).						
a) Directors, executive office	rs and promoters	of the issuer							
Provide the following information fo						state the	province	or	
				lationship to issuer elect all that apply)					
				Province or country		D	0	Р	
	Pomroy	Raymond		Ontario		✓	✓		
	Qureshi	Khurram		Ontario			<ul> <li>✓</li> </ul>		
	Gupta	Vikas		Ontario		✓			
	Chowdhury	Musabbir		Ontario		✓			
	Brown	Brenda		Ontario		✓			
	Rootenberg	Alan		Ontario		✓			
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				tionship to promoter ne or both if applica		
				Province or country	D		C	)	
c) Residential address of eac	ch individual								

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

## **ITEM 10 - CERTIFICATION**

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

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

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

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

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

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

Name of issuer/underwriter/ investment fund manager/agent	AGILE BLOCKCHAIN CORP.							
Full legal name	POMROY RAYMOND							
	Family name First given name		Secondary given names			ames		
Title	CHIEF EXECUTIVE OFFICE	CHIEF EXECUTIVE OFFICER						
Telephone number	9055107982	Email address	ray.pomr	y.pomroy@agileblockchain.ca				
Signature	Raymond Pomroy	Date	2020	04	24			
			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	Akbar	Kaiser			Title	Lawyer
	Family name	First given name	Secondary	given names		
Name of company	Akbar Law Firm					
Telephone number	4164505995	E	nail address	kaiser@akb	ar-law.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.