FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

OMB APPROVAL
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Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. *See* Instruction 1(b).

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

(Print or Ty	pe Response	es)																
	nd Address o os George	f Reporting Pe	erson *		ssuer Na lar Acqı						mbol		5. Relation		eck all appli		suer	
90 KIFIS		(First) ENUE, MAR	(Middle) ROUSSI		ate of Ear 28/2016	lies	t Tran	sactio	n (M	onth/Day	/Year)		X Office	er (give title bel	ow) O, CFO and	Other (specif	y below	v)
ATHENS	S, J3 15125	(Street)		4. If	Amendm	nent,	, Date	Origii	nal Fi	iled(Mont	h/Day/Year))	Form file	ual or Joint/ ed by One Repo ed by More than	rting Person		icable l	Line)
(City		(State)	(Zip)			Tal	ble I -	Non-	Deri	vative S	ecurities	Acqui	red, Disp	osed of, or	Beneficially	Owned		
1.Title of S (Instr. 3)	Security		2. Transaction Date (Month/Day/Year)	Exec any	Deemed ution Da		f Cod (Ins			(A) or I (D)	rities Acc Disposed	of	Beneficia	nt of Securit lly Owned I Transaction and 4)	Following	6. Ownershi Form: Direct (D or Indirec	p of Be Ov	eneficial wnership
							C	ode	V	Amoun	(A) or (D)	Price				(I) (Instr. 4)	(111	1811. 4)
Common	Stock		09/28/2016				J	(1)		36,887		\$ 0 (1)	443,157			I	Se Fo	ootnote
Common	Stock		09/28/2016				J	<u>(2)</u>		38,303	D	\$ 0 (2)	460,162			I	Se Fo (2)	ootnote
Reminder: indirectly.	Report on a	separate line f	or each class of secu	ırities	beneficia	ılly (owned	direc	tly o	r								
									cont	ained ii	n this fo	rm ar	e not req	ection of ir uired to re d OMB cor	spond un	less	SEC	1474 (9- 02)
			Table II - I								of, or Ber ible secu			l				
1. Title of Derivative Security (Instr. 3)	Conversion	3. Transactio Date (Month/Day/	n 3A. Deemed Execution Da	ite, if	4. Transact Code	tion	5. Nu of	vative rities aired or cosed by : 3,	6. Da	ate Exer Expiration	cisable on Date	7. T Ame Und Seco	itle and ount of derlying urities tr. 3 and		9. Number Derivative Securities Beneficiall Owned Following Reported Transaction (Instr. 4)	Owne Form Deriva Securi Direct or Ind	of ative ty: (D) irect	11. Nature of Indirec Beneficial Ownershij (Instr. 4)
					Code	V	(A)	(D)	Date Exer	cisable	Expiratio Date	n Title	Amount or Number of Shares					

Reporting Owners

Reporting Owner Name / Address			Relationships	
Reporting Owner Ivanie / Address	Director	10% Owner	Officer	Other
Syllantavos George 90 KIFISSIAS AVENUE, MAROUSSI ATHENS, J3 15125	X	X	Co-CEO, CFO and Secretary	
Magellan Investments Corp 90 KIFISSIAS AVENUE, MAROUSSI ATHENS, J3 15125		X		
Firmus Investments Inc 90 KIFISSIAS AVENUE, MAROUSSI ATHENS, J3 15125		X		

Signatures

/s/ George Syllantavos	09/30/2016	
**Signature of Reporting Person	Date	
/s/ George Syllantavos, Authorized Person, Magellan Investments Corp.	09/30/2016	

Signature of Reporting Person	Date
/s/ George Syllantavos, Authorized Person, Firmus Investments Inc.	09/30/2016
**Signature of Reporting Person	Date

Explanation of Responses:

- * If the form is filed by more than one reporting person, see Instruction 4(b)(v).
- ** Intentional misstatements or omissions of facts constitute Federal Criminal Violations. See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).
- As contemplated in connection with the initial public offering of the issuer, 36,387 shares of common stock of the issuer were returned by Magellan Investments Corp. to (1) the issuer for no consideration and cancelled because the underwriters' over-allotment option was not exercised in full. George Syllantavos is the sole officer and director of Magellan Investments Corp.
- As contemplated in connection with the initial public offering of the issuer, 38,303 shares of common stock of the issuer were returned by Firmus Investments Inc. to the (2) issuer for no consideration and cancelled because the underwriters' over-allotment option was not exercised in full. George Syllantavos is the sole officer and director of

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.