

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

OMB APPROVAL				
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Estimated average burden				
nours per respons	e 0.5			

#### INITIAL STATEMENT OF 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 Type Responses)									
Name and Address of Reporting Person * Aichele David	2. Date of Event Requiring Statement (Month/Day/Year)  03/10/2017								
(Middle) (First) (Middle) 9805 NORTHCROSS CENTER CT, SUITE H				4. Relationship of Issuer (Check	Reporting Person all applicable)	Filed(Mor 03/10/2	5. If Amendment, Date Original Filed(Month/Day/Year) 03/10/2017		
(Street) HUNTERSVILLE, NC 28078					X_ Officer (give tit		6. Individual Applicable X Form f	6. Individual or Joint/Group Filing(Check Applicable Line)X_Form filed by One Reporting PersonForm filed by More than One Reporting Person	
(City) (State) (Zip)		Table I - Non-Derivative Securities Beneficially Owned						Owned	
1. Title of Security (Instr. 4)	2. Amount of Se Beneficially Ow (Instr. 4)				ed		4. Nature of Indirect Beneficial Ownership (Instr. 5)		
Common Stock, par value \$0.001 per sh	er share 136,250			D					
Reminder: Report on a separate line for each class  Persons who responses the form discovered by the second	nd to the o	collection rrently va	of info	ormatio B conti	n contained in t		·		
1. Title of Derivative Security					· · · · · · · · · · · · · · · · · · ·	4. Conversion	5. Ownership	6. Nature of Indirect Beneficial	
(Instr. 4)	2. Date Exercisable and Expiration Date (Month/Day/Year)  3. Title and Securities US ecurity (Instr. 4)		rities Un	derlying Derivativ	or Exercise Price of Derivative	Form of Derivative Security: Direct	Ownership (Instr. 5)		
	Date Exercisable	Expiration Date	Title	Amoun Shares	t or Number of	Security	(D) or Indirect (I) (Instr. 5)		

## **Reporting Owners**

		Relationships			
Reporting Owner Na	me / Address	Director	10% Owner	Officer	Other
Aichele David 9805 NORTHCROSS SUITE H HUNTERSVILLE, N				VP of Business Development	

### **Signatures**

/s/ David Aichele	03/27/2017
**Signature of Reporting Person	Date

#### **Explanation of Responses:**

- \* If the form is filed by more than one reporting person, see Instruction 5(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).

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.