## Edgar Filing: Houtkin Sherry - Form 4

Houtkin She Form 4											
October 03,	ЛЛ								OMB AF	PROVAL	
	UNITED	STATES			AND EX , D.C. 20		ANGE CO	OMMISSION	OMB Number:	3235-0287	
Check the check							Expires: Januar				
subject Section Form 4	<b>1ENT OF</b>	' CHAN	GES IN SECUI		ICIA	ERSHIP OF	Estimated average burden hours per response				
Form 5 obligation may con <i>See</i> Inst 1(b).	ons ntinue. Section 17(	Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940									
(Print or Type	Responses)										
1. Name and Address of Reporting Person <u>*</u> Houtkin Sherry								6. Relationship of Reporting Person(s) to ssuer			
			[GENC]		5111125			(Check	all applicable	)	
(Last) (First) (Middle) 2295 NW CORPORATE BLVD, SUITE 230			3. Date of Earliest Transaction(Month/Day/Year)09/29/2017					Director X 10% Owner Officer (give title Other (specify below) below)			
	(Street)			ndment, D hth/Day/Yea	ate Origina r)	l		6. Individual or Joi Applicable Line) _X_ Form filed by Ou Form filed by Mo	ne Reporting Per	rson	
	TON, FL 33431						:	Person			
(City)	(State)	(Zip)	Table	e I - Non-l	Derivative	Secu	rities Acqu	ired, Disposed of,	or Beneficial	ly Owned	
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)		Date, if y/Year)	Code	nor Dispose (Instr. 3, 4	ed of (		5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
Common Stock, \$.001 par value	09/29/2017			S	14,256	D	\$ 17.76	1,365,309	D		
Common Stock, \$.001 par value	10/02/2017			S	21,302	D	\$ 17.7899	1,344,007	D		

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

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

## Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

1. Title of	2.	3. Transaction Date	3A. Deemed	4.	5.	6. Date Exerc	cisable and	7. Title	e and	8. Price of	9. Nu
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transactio	onNumber	Expiration D	ate	Amou	nt of	Derivative	Deriv
Security	or Exercise		any	Code	of	(Month/Day/	Year)	Underl	lying	Security	Secu
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	Derivative	e		Securit	ties	(Instr. 5)	Bene
	Derivative				Securities			(Instr.	3 and 4)		Owne
	Security				Acquired						Follo
					(A) or						Repo
					Disposed						Trans
					of (D)						(Instr
					(Instr. 3,						
					4, and 5)						
									Amount		
						Date	Expiration		0r Numebor		
						Exercisable	Date		Number		
					(A) (D)				of		
				Code V	(A) (D)				Shares		

## **Reporting Owners**

Reporting Owner Name / Address		Relationships						
		Director	10% Owner	Officer	Other			
Houtkin Sherry 2295 NW CORPORATE SUITE 230 BOCA RATON, FL 3343			Х					
Signatures								
/s/ Sherry Houtkin	10/03/2	2017						
**Signature of	Dat	e						

## **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).

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.

Reporting Person