FORM 4

(Print or Type Responses)

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

| OMB APPROVAL | | | | | | | |
|------------------------|----------|--|--|--|--|--|--|
| OMB Number: | 3235-028 | | | | | | |
| Estimated average burd | den | | | | | | |
| hours per response | 0.: | | | | | | |

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

| | | Reporting Person* N MARTIN | | | | ame and A CORI | | | ading S | Symbol | | 5. | Relations | • | | Person(s) to all applicabl | | | |
|---|---|--|--|---|-------|--|------------------------|----------------------------|-------------------------------|--------------------------------------|----------------------|-----------------|---|--|------------------------|--|--|---|---|
| (Last) (First) (Middle) 23 MIKELEN DRIVE | | | | 3. Date of Earliest Transaction (Month/Day/Year) 03/26/2015 | | | | | | | | | X_Officer (give title below) Other (specify below) President | | | | | | |
| PORT PE | ERRY, A6 | (Street) | | 4. If An | nendi | ment, Da | te Or | riginal F | iled(Moi | nth/Day/Ye | ear) | 6. _> — | _ Form filed | by On | e Reporting P | Filing(Check A erson eporting Person | applicable Line | e) | |
| (City | <i>i</i>) | (State) | (Zip) | | | | Tabl | le I - No | n-Deri | vative S | ecuritie | es Acquire | ed, Dispos | ed of | , or Benefi | icially Owne | i | | |
| 1.Title of Se (Instr. 3) | ecurity | | 2. Transaction Date (Month/Day/Yea | r) any | ition | | 3. Tr Code (Inst | | (A | Securiti A) or Dis nstr. 3, 4 | posed o | f (D) O | | owing | curities Beng Reported | | 6. Ownership Form: Direct (D) | 7. Nature of Indirect Beneficial Ownership | |
| | | | | (IVIOIII | ui/De | iy/ i cai/ | C | ode | V A | Amount | (A) or (D) | Price | isu. 3 and | · ¬1) | | | or Indirect (I) (Instr. 4) | (Instr. 4) | |
| Common | Shares | | | | | | | | | | | 5: | 50,000 | | | | [| Private holding company | |
| Common | Shares | | 12/16/2015 | | | | A | (1) | 5: (1 | 5,000 1 | A | (1) 60 | 605,000 | | | | ĺ | Private holding company | |
| 1 Title of | 2 | 3 Transaction | | (e.g., p | | calls, wa | rran | a cquired ts, optic | currer , Dispo ons, cor | ntly vali sed of, on nvertible | or Benef e securi | control | number. vned | | | orm display | | 11 Nature | |
| 1. Title of Derivative Security (Instr. 3) | 2. Conversion or Exercise Price of | 3. Transaction Date (Month/Day/Year) | 3A. Deemed Execution Date, if | (e.g., p 4. Transac Code | outs, | 5. Numb | oer vative | 6. Date Expira (Mont | ons, con e Exerc | nvertible isable an ate | e securi | ties) | nd Amoun lying | | | 9. Number of Derivative Securities Beneficially | f 10. Owners Form of Derivat | Beneficial | |
| | Derivative Security | | | | | or Dispo of (D) (Instr. 3, and 5) | | | | | | | | Owned Following Reported Transaction(| | (D) rect | | | |
| | | | | | Code | V | (A) | (D) | Date Exerci | isable | Expira Date | tion | Title | Amour or Number of Shar | er | | (Instr. 4) | (Instr. 4 |) |
| Stock Options | \$ 0.09 (2) | | | | | | | 03/26 | 6/2015 | 03/26 | 5/2020 | Commo Shares | 1500.0 | 000 | | 500,000 | D | | |
| Stock Options | \$ 0.09 (2) | 12/16/2015 | | A(1) | | 50,000 (1) | | 03/26 | 5/2015 | 03/26 | 5/2020 | Commo Shares | | | \$ 0.09 (2) | 550,000 | D | | |
| Warrants | \$ 0.23 (2) | | | | | | | 05/15 | 5/2015 | 05/15 | 5/2017 | Commo | 1130.0 | 000 | | 130,000 | I | Private holding company | |
| Warrants | \$ 0.23 (2) | 12/16/2015 | | A ⁽¹⁾ | | 13,000 | | 05/15 | 5/2015 | 05/15 | 5/2017 | Commo | - , - | | \$ 0.23 (2) | 143,000 | I | Private holding company | |

Reporting Owners

| | Relationships | | | | | |
|--|---------------|--------------|-----------|-------|--|--|
| Reporting Owner Name / Address | Director | 10% Owner | Officer | Other | | |
| DOCHERTY JOHN MARTIN 23 MIKELEN DRIVE PORT PERRY, A6 L9L 1V1 | | | President | | | |

Signatures

| Allan Spissinger | 12/18/2015 | | |
|---------------------------------|------------|--|--|
| **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).
- (1) Adjusted to forward 1.1 split
- (2) Adjusted price to Forward 1.1 split

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.