CorMedix Inc. Form 3/A October 31, 2014

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

INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF

**OMB APPROVAL** 

**OMB** Number:

3235-0104

Expires:

January 31, 2005

0.5

Estimated average burden hours per response...

**SECURITIES** 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 \*

TELLEZ CORA M

(Last) (First)

(Middle)

Statement

(Month/Day/Year)

01/22/2013

2. Date of Event Requiring 3. Issuer Name and Ticker or Trading Symbol

C/O CORMEDIX INC., Â 745

**ROUTE 202-206, SUITE 303** 

(Street)

CorMedix Inc. [CRMD]

4. Relationship of Reporting

Person(s) to Issuer

5. If Amendment, Date Original

Filed(Month/Day/Year) 04/07/2014

(Check all applicable)

\_X\_ Director Officer

10% Owner Other (give title below) (specify below)

6. Individual or Joint/Group Filing(Check Applicable Line) \_X\_ Form filed by One Reporting

Person

Form filed by More than One

Reporting Person

4. Nature of Indirect Beneficial

#### BRIDGEWATER, NJÂ US 08807

(City) (State) (Zip)

1. Title of Security (Instr. 4)

2. Amount of Securities Beneficially Owned

(Instr. 4)

Ownership

(I)

Form: Direct (D)

Table I - Non-Derivative Securities Beneficially Owned

Ownership (Instr. 5)

or Indirect

Common Stock, \$0.001 par value per share

 $200^{(1)}$ 

(Instr. 5)

SEC 1473 (7-02)

Â 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 Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

1. Title of Derivative Security (Instr. 4)

2. Date Exercisable and **Expiration Date** (Month/Day/Year)

3. Title and Amount of Securities Underlying **Derivative Security** (Instr. 4)

Conversion or Exercise Price of

5. Ownership Form of Derivative

6. Nature of Indirect Beneficial

Ownership

(Instr. 5)

Title

Derivative Security: Direct (D) Security

### Edgar Filing: CorMedix Inc. - Form 3/A

	Date Exercisable	Expiration Date		Amount or Number of Shares		or Indirect (I) (Instr. 5)	
Series C-3 Non-Voting Convertible Preferred Stock (1) (2)	(2)	(2)	Common Stock, \$0.001 par value per share	50,000	\$ 1	D	Â
Common Stock Warrants (right to buy) (1) (2)	01/08/2014	01/08/2020	Common Stock, \$0.001 par value per share	25,000	\$ 1.25	D	Â

# **Reporting Owners**

Reporting Owner Name / Address	Relationships					
	Director	10% Owner	Officer	Other		
TELLEZ CORA M						
C/O CORMEDIX INC.	ÂΧ	Â	â	â		
745 ROUTE 202-206, SUITE 303	АА	Α	А	A		
BRIDGEWATER, NJ US 08807						

## **Signatures**

/s/Alexander M.
Donaldson

\*\*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).
- (1) This Form 3 amendment is being filed to correct the original Form 3 filed on April 7, 2014. The Common Stock, Series C-3 Non-Voting Convertible Preferred Stock and warrants were inadvertently omitted.
- On January 8, 2014, the reporting person acquired through a private placement (i) 5,000 shares of the Company's Series C-3 Non-Voting Convertible Preferred Stock, each share is convertible into 10 shares of Common Stock, \$0.001 par value per share; and (ii) a five-year warrant to purchase Common Stock at an exercise price of \$1.25 per share. The Series C-3 Non-Voting Convertible Preferred Stock and warrants were purchased together at a purchase price of \$10.00 per share.

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.

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