FORM 3

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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hours per response:	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

State		2. Date of Event Requiring Statement (Month/Day/Year) 06/01/2015	r Name and Ticker or Trading TECHNOLOGIES 1			
(Last) 1665 SCENIC A SUITE 250	(First)	(Middle)		ionship of Reporting Person(s all applicable) Director Officer (give title below) SVP & President, H	10% Owner Other (specify below)	5. If Amendment, Date of Original Filed (Month/Day/Year) 06/03/2015
(Street) COSTA MESA (City)	CA (State)	92626 (Zip)				Individual or Joint/Group Filing (Check Applicable Line) Y Form filed by One Reporting Person Form filed by More than One Reporting Person

Table I - Non-Derivative Securities Beneficially Owned

1. Title of Security (Instr. 4)		3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)	4. Nature of Indirect Beneficial Ownership (Instr. 5)	
Common Stock	49,382(1)	D		

Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

1. Title of Derivative Security (Instr. 4)			3. Title and Amount of Securities Un Derivative Security (Instr. 4)	Title and Amount of Securities Underlying rivative Security (Instr. 4)		Form: Direct (D) or	6. Nature of Indirect Beneficial Ownership (Instr. 5)
	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	Derivative Security		

Explanation of Responses:

1. The number of shares beneficially owned was incorrectly reported on the reporting person's original Form 3, and was also incorrectly reported on one Form 4 filed by the reporting person after the original Form 3 was filed.

Remarks:

/s/ Belinda Darden, Attorney-in-Fact

08/21/2015

** Signature of Reporting Person Date

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

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

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 Number.

 $^{^{\}star}$ 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).