OptimizeRx Corp Form SC 13D/A June 20, 2018

UNITED STATES

SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

SCHEDULE 13D

(Rule 13d-101)

INFORMATION TO BE INCLUDED IN STATEMENTS FILED PURSUANT

TO § 240.13d-1(a) AND AMENDMENTS THERETO FILED PURSUANT TO

§ 240.13d-2(a)

(Amendment No. 2)1

OptimizeRx Corporation

(Name of Issuer)

Common Stock, par value \$0.001 per share

(Title of Class of Securities)

<u>68401U105</u>

(CUSIP Number)

NIRAJ M. PATEL

Wolverine Asset Management, LLC

175 W. Jackson Blvd., Suite 340

Chicago, Illinois 60604

(312) 884-4400

ANDREW FREEDMAN, ESQ.

OLSHAN FROME WOLOSKY LLP

1325 Avenue of the Americas

New York, New York 10019

(212) 451-2300

(Name, Address and Telephone Number of Person

Authorized to Receive Notices and Communications)

May 14, 2018

(Date of Event Which Requires Filing of This Statement)

If the filing person has previously filed a statement on Schedule 13G to report the acquisition that is the subject of this Schedule 13D, and is filing this schedule because of 240.13d-1(e), 240.13d-1(f) or 240.13d-1(g), check the following box .

Note: Schedules filed in paper format shall include a signed original and five copies of the schedule, including all exhibits. *See* § 240.13d-7 for other parties to whom copies are to be sent.

1 The remainder of this cover page shall be filled out for a reporting person's initial filing on this form with respect to the subject class of securities, and for any subsequent amendment containing information which would alter disclosures provided in a prior cover page.

The information required on the remainder of this cover page shall not be deemed to be "filed" for the purpose of Section 18 of the Securities Exchange Act of 1934 ("Act") or otherwise subject to the liabilities of that section of the Act but shall be subject to all other provisions of the Act (however, *see* the *Notes*).

2

5

1	NAME OF REPORTING
1	PERSON

WOLVERINE ASSET MANAGEMENT, LLC CHECK THE APPROPRIATE BOX IF A MEMBER OF A (a) GROUP

(b)

3 SEC USE ONLY

4 SOURCE OF FUNDS

OO (see Item 3) CHECK BOX IF DISCLOSURE OF LEGAL PROCEEDINGS IS REQUIRED PURSUANT TO ITEM 2(d) OR 2(e)

6 CITIZENSHIP OR PLACE OF ORGANIZATION

	Illinois	
		SOLE
NUMBER OF	7	VOTING
		POWER
SHARES		
BENEFICIALLY		- 0 -
		SHARED
OWNED BY	8	VOTING
		POWER
EACH		
REPORTING		755,821
		SOLE
PERSON WITH	9	DISPOSITIVE
		POWER
		- 0 -
		SHARED
	10	DISPOSITIVE
		POWER

755,821

	AGGREGATE AMOUNT
11	BENEFICIALLY OWNED BY
	EACH REPORTING PERSON

755,821 CHECK BOX IF THE AGGREGATE AMOUNT IN ROW 12 (11) EXCLUDES CERTAIN SHARES

	PERCENT OF CLASS
13	REPRESENTED BY
	AMOUNT IN ROW (11)

6.5%

- TYPE OF REPORTING 14 PERSON

IA

2

	10100	
1	NAME OF R PERSON	EPORTING
2	WOLVER HOLDING CHECK THI APPROPRIA BOX IF A M OF A GROU	GS, L.P. E ATE IEMBER ^(a)
3	SEC USE ON	NLY
4	SOURCE OF	FFUNDS
5	OO (see It CHECK BO2 DISCLOSUF LEGAL PROCEEDIN REQUIRED PURSUANT ITEM 2(d) O	X IF RE OF NGS IS TO
6	CITIZENSH OF ORGAN	IP OR PLACE IZATION
NUMBER OF SHARES	Illinois 7	SOLE VOTING POWER
BENEFICIALLY	7	- 0 -
OWNED BY EACH	8	SHARED VOTING POWER
REPORTING		755,821
PERSON WITH	9	SOLE DISPOSITIVE POWER

- 0 -SHARED 10 DISPOSITIVE POWER

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755,821 AGGREGATE AMOUNT BENEFICIALLY OWNED BY EACH REPORTING PERSON

755,821 CHECK BOX IF THE AGGREGATE 12 AMOUNT IN ROW (11) EXCLUDES CERTAIN SHARES

13 PERCENT OF CLASS 13 REPRESENTED BY AMOUNT IN ROW (11)

6.5%

14	TYPE OF REPORTING
14	PERSON

LIND

HC

3

1	NAME OF REPORTING PERSON		
2	PARTNE CHECK TH APPROPRI	E ATE ⁄IEMBER ^(a)	
3	SEC USE O	NLY	
4	SOURCE O	F FUNDS	
5	OO (see I CHECK BO DISCLOSU LEGAL PROCEEDI REQUIRED PURSUAN ITEM 2(d) O	OX IF RE OF NGS IS Γ ΤΟ	
6	CITIZENSH OF ORGAN	IIP OR PLACE IIZATION	
	Illinois	SOLE	
NUMBER OF	7	VOTING POWER	
SHARES BENEFICIALLY	7	- 0 - Shared	
OWNED BY	8	VOTING POWER	
EACH REPORTING		755,821 SOLE	
PERSON WITH	9	DISPOSITIVE POWER	
	10	- 0 - Shared Dispositive	

POWER

11	755,821 AGGREGATE AMOUNT BENEFICIALLY OWNED BY EACH REPORTING PERSON
12	755,821 CHECK BOX IF THE AGGREGATE AMOUNT IN ROW (11) EXCLUDES CERTAIN SHARES
13	PERCENT OF CLASS REPRESENTED BY AMOUNT IN ROW (11)
14	6.5% TYPE OF REPORTING PERSON
	CO/HC

1	NAME OF R PERSON	REPORTING
2	CHRISTO CHECK THI APPROPRIA BOX IF A M OF A GROU	ATE IEMBER ^(a)
3	SEC USE ON	NLY
4	SOURCE OF	FFUNDS
5	OO (see It CHECK BO) DISCLOSUF LEGAL PROCEEDIN REQUIRED PURSUANT ITEM 2(d) O	X IF RE OF NGS IS
6	CITIZENSH OF ORGAN	IP OR PLACE IZATION
NUMBER OF	USA 7	SOLE VOTING POWER
SHARES BENEFICIALLY	,	0
OWNED BY	8	- 0 - SHARED VOTING POWER
EACH		755 001
REPORTING PERSON WITH	9	755,821 SOLE DISPOSITIVE POWER
	10	- 0 - SHARED DISPOSITIVE POWER

11	755,821 AGGREGATE AMOUNT BENEFICIALLY OWNED BY EACH REPORTING PERSON
12	755,821 CHECK BOX IF THE AGGREGATE AMOUNT IN ROW (11) EXCLUDES CERTAIN SHARES
13	PERCENT OF CLASS REPRESENTED BY AMOUNT IN ROW (11)
14	6.5% TYPE OF REPORTING PERSON
	IN/HC

1	NAME OF PERSON	FREPORTING
2	CHECK T	RIATE MEMBER ^(a)
3	SEC USE	ONLY
4	SOURCE	OF FUNDS
5	OO (see CHECK B DISCLOS LEGAL PROCEEI REQUIRE PURSUAN ITEM 2(d)	URE OF DINGS IS D NT TO
6		SHIP OR PLACE NIZATION
	USA	
NUMBER OF	7	SOLE VOTING POWER
SHARES BENEFICIALLY	7	- 0 -
OWNED BY	8	SHARED VOTING POWER
EACH REPORTING		755,821
PERSON WITH	9	SOLE DISPOSITIVE POWER
	10	- 0 - SHARED DISPOSITIVE POWER

	755,821
11	AGGREGATE AMOUNT
	BENEFICIALLY OWNED
	BY EACH REPORTING
	PERSON

755,821 CHECK BOX IF THE AGGREGATE AMOUNT IN ROW (11) EXCLUDES CERTAIN SHARES