

Louisville

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

OMB APPROVAL
OMB Number: 3235-0076
Expires: August 31, 2015
Estimated Average burden hours per response: 4.0

	vv asiii	ington, D.C.	per response: 4.0	
1. Issuer's Ident	tity			
CIK (Filer ID Number)	ury Previous Nar	ne(s) None	Entity Type	
0001509261	Fits My Sty	-		-
Name of Issuer		STYLE INC	Corporation	
AntriaBio, Inc.	FIISMI	TILE INC	C Limited Partnership	
Jurisdiction of			C Limited Liability Co.	mpany
Incorporation/Organization	on		General Partnership)
DELAWARE			C Business Trust	
Year of Incorporation/C	Organization		C Other	
• Over Five Years Ago			- City	
Within Last Five Year (Specify Year)	rs			
C Yet to Be Formed				
0 D.: DI.	(D . :		· • · · · · · · · · · · · · · · · · · ·	
2. Principal Plac	ce of Business a	ind Contact Ir	ntormation	
Name of Issuer		\neg		
AntriaBio, Inc.				
Street Address 1		Street Address	<u> </u>	
1450 INFINITE DRIVE				
City	State/Province/C			
LOUISVILLE	COLORADO	80027	(303) 222-2128	
0.5.1.1.5				
Related Pers	ons			
Last Name	First Name		Middle Name	
Elam	Nevan		Charles	
Street Address 1		Street Address	<u> </u>	
1450 Infinite Drive		7	· <u> </u>	
City	State/Province	ce/Country	ZIP/Postal Code	
Louisville	COLORAI		80027	
Louisvine	COLORA		00027	
Relationship:	Executive Officer	☑ Director	Promoter	
Relationship.	Executive Officer	Director	1 Tomoter	
Clarification of Response	(if Necessary)			
-				
Last Name	First Name		Middle Name	
Huh	Hoyoung			
Street Address 1		Street Address	s 2	
1450 Infinite Drive				
City	State/Proving	ce/Country	ZIP/Postal Code	

COLORADO

80027

Relationship:	V	Execut	ive Officer	V	Director		Promoter
Clarification of Respon	ise (if N	lecessary	7)				
Last Name			First Name			Middle	Name
Sherman			Barry				
Street Address 1				9	Street Address 2		
1450 Infinite Drive							
City			State/Province/Country			ZIP/Pos	stal Code
Louisville			COLORADO)		80027	
Relationship:		Execut	ive Officer	V	Director	Promoter	
Clarification of Respon	se (if N	lecessary	7)				
Ciai monton of frespor	150 (11 1	, , ,	,				
Last Name			First Name			Middle	Name
Welch			David			F.	
Street Address 1				9	Street Address 2	1	
1450 Infinite Drive] [
City			State/Province/Country		ZIP/Postal Code		
Louisville			COLORADO			80027	
Louisvine			COLORADO			00027	
Relationship:		Evecut	ive Officer	V	Director		Promoter
Relationship: Executive Officer Director Promoter							
Clarification of Response (if Necessary)							
Last Name		First Name		Middle Name			
Kim			Tae			Hoon	
Street Address 1				1 6	Street Address 2		
1450 Infinite Drive							
City			State/Province/Country		ZIP/Postal Code		
Louisville			COLORADO		80027		
Relationship:		Execut	ive Officer	V	Director		Promoter
Clarification of Respon	Clarification of Response (if Necessary)						
Last Name			First Name			Middle	Name
Patel			Samir		R.		
Street Address 1 Street Address 2							
1450 Infinite Drive							
City			State/Province	/Cour		7.IP/Pos	stal Code
Louisville			State/Province/Country COLORADO		ZIP/Postal Code 80027		
Louisville			COLORADO			0002/	
Polotionakin.	-	E	ivo Office-	-	Director		Duamatan
Relationship:			ive Officer	ľ	Director		Promoter

Last Name		First Name		Middle	Name	
Mantripragada		Sankaram]	
Street Address 1			Street Addre	ess 2		
1450 Infinite Drive						
City		State/Province/0	Country	ZIP/Po	stal Code	
Louisville		COLORADO		80027	1	
,						
Relationship:	Execut	ive Officer	☐ Director	•	Promoter	
Clarification of Respon	se (if Necessary	y)				
Last Name		First Name		Middle	Name	
Fields		Morgan		Lynn	Lynn	
Street Address 1			Street Addre	ess 2		
1450 Infinite Drive						
City		State/Province/0	Country	ZIP/Po	ZIP/Postal Code	
Louisville		COLORADO		80027	1	
<u> </u>		l (<u>'</u>				
Relationship:	Execut	ive Officer	☐ Director	•	Promoter	
Last Name Deperro		First Name		Middle R.	Name	
Street Address 1		Witchact	Street Addre			
1450 Infinite Drive			Street Addre			
City		State/Province/0	Country	ZID/Do	stal Code	
Louisville		COLORADO			80027	
Louisvinc		COLORADO		00027		
Relationship:	Execut	ive Officer	☐ Director	*	Promoter	
Clarification of Respon	se (if Necessary	y)				
Last Name Roberts		First Name		Middle	Name	
Street Address 1		1 12	Street Addre	ess 2		
1450 Infinite Drive						
City		State/Province/0	Country	ZIP/Po	stal Code	
Louisville		COLORADO		80027		
<u> </u>						
Relationship:	Execut	ive Officer	☐ Director		Promoter	
Clarification of Respon	se (if Necessary	y)				
Last Name		First Name		Middle	Name	
Liffick	ffick		Batsh	Batsha		
Į.	[F					

Street Address 1	Street Address 2			
1450 Infinite Drive				
	State/Province/Country ZIP/Postal Co	de		
Louisville	COLORADO 80027			
	00027			
Relationship: Executiv	ve Officer Director	Promoter		
Clarification of Response (if Necessary)				
4. Industry Group				
	Health Care C Potalline			
Agriculture	© Biotechnology			
Banking & Financial Services	C Health Insurance C Restaura	nts		
C Commercial Banking	C Hospitals & Physicians Technology	gy		
C Insurance		puters		
C Investment Penking	C Other Health Care	ommunications		
C Investment Banking C Pooled Investment Fund	C Othe	er Technology		
Other Banking & Financial	Travel			
C Services	C Manufacturing C Airli	nes & Airports		
Business Services	-	ging & Conventions		
Energy	C Commercial C Tour	ism & Travel Services		
C Coal Mining	C Construction C Other	r Travel		
C Electric Utilities	C REITS & Finance C Other			
C Energy Conservation	C Residential			
C Environmental Services	C Other Real Estate			
Oil & Gas Other Energy				
Center Energy				
5. Issuer Size				
Revenue Range	Aggregate Net Asset Value Range			
No Revenues	No Aggregate Net Asset V	'alue		
\$1 - \$1,000,000	\$1 - \$5,000,000			
\$1,000,001 - \$5,000,000	\$5,000,001 - \$25,000,000			
\$5,000,001 - \$25,000,000	\$25,000,001 - \$50,000,000			
\$25,000,001 - \$100,000,000	\$50,000,001 - \$100,000,00	0		
Over \$100,000,000	Over \$100,000,000			
Decline to Disclose	C Decline to Disclose			
Not Applicable	C Not Applicable			
6. Federal Exemption(sapply) Rule 504(b)(1) (not (i), (ii) or (iii)) Rule 504 (b)(1)(i) Rule 504 (b)(1)(ii)	and Exclusion(s) Claimed (selection)	ect all that		
Rule 504 (b)(1)(iii)	Securities Act Section 4(a)(5)			
	Investment Company Act Section 3(c)			

7. Type of Filing	
_	17-03-06 First Sale Yet to Occur
☐ Amendment	11355316 1655 5561
Amendment	
8. Duration of Offering	
-	nan one year? C Yes C No
Does the Issuer intend this offering to last more th	nan one year?
0. T. () (0. 10) (0. 10)	
9. Type(s) of Securities Offere	
Interests Equity	•
Tenant-in-Common Securities Debt Debt	n, Warrant or Other Right to
Mineral Property Securities Acquir	re Another Security
The state of the s	(describe)
10. Business Combination Tra	921
Is this offering being made in connection with a betransaction, such as a merger, acquisition or exch	168 100
Clarification of Response (if Necessary)	
11. Minimum Investment	
Minimum investment accepted from any outside investor	\$ USD
40. Calaa Canananaatian	
12. Sales Compensation	Desirion CDD Number
Recipient	Recipient CRD Number None
(Associated) Puelcon on Paglon	(Associated) Broker or Dealer CRD
(Associated) Broker or Dealer None	Number None
C	
Street Address 1	Street Address 2
City	State/Province/Country ZIP/Postal Code
State(s) of Solicitation	□ All States
13. Offering and Sales Amour	nte
13. Offering and Sales Afflour	ito
Total Offering Amount \$ 15000000	USD Indefinite
	<u> </u>

Total Amount Sold \$ 6726190 USD
Fotal Remaining to be \$\overline{8273810}\$ USD □ Indefinite
Clarification of Response (if Necessary)
14. Investors
14. IIIVESIOIS
Select if securities in the offering have been or may be sold to persons who do not qualify as accredited investors, Number of such non-accredited investors who already have invested in the offering
Regardless of whether securities in the offering have been or may be sold to persons who do not qualify as accredited investors, enter the total number of investors who already have invested in the offering:
15. Sales Commissions & Finders' Fees Expenses
Provide separately the amounts of sales commissions and finders' fees expenses, if any. If the amount of an expenditure is not known, provide an estimate and check the box next to the amount. Sales Commissions \$ 0 USD
Finders' Fees \$ 0 USD Estimate
Clarification of Response (if Necessary)
16. Use of Proceeds
Provide the amount of the gross proceeds of the offering that has been or is proposed to be used for payments to any of the persons required to be named as executive officers, directors or promoters in response to Item 3 above. If the amount is unknown, provide an estimate and check the box next to the amount. S O USD Estimate
Clarification of Response (if Necessary)
Signature and Submission
Please verify the information you have entered and review the Terms of Submission

below before signing and clicking SUBMIT below to file this notice.

Terms of Submission

In submitting this notice, each Issuer named above is:

- Notifying the SEC and/or each State in which this notice is filed of the offering of securities described and undertaking to furnish them, upon written request, the information furnished to offerees.
- Irrevocably appointing each of the Secretary of the SEC and, the Securities Administrator or other legally designated officer of the State in which the Issuer maintains its principal place of business and any State in which this notice is filed, as its agents for service of process, and agreeing that these persons may accept service on its behalf, of any notice, process or pleading, and further agreeing that such service may be made by registered or certified mail, in any Federal or state action, administrative proceeding, or arbitration brought against it in any place subject to the jurisdiction of the United States, if the action, proceeding or arbitration (a) arises out of any activity in connection with the offering of securities that is the subject of this notice, and (b) is founded, directly or indirectly, upon the provisions of: (i) the Securities Act of 1933, the Securities Exchange Act of 1934, the Trust Indenture Act of 1939, the Investment Company Act of 1940, or the Investment Advisers Act of 1940, or any rule or regulation under any of these statutes, or (ii) the laws of the State in which the issuer maintains its principal place of business or any State in which this notice is filed.
- Certifying that, if the issuer is claiming a Regulation D exemption for the offering, the issuer is not

disqualified from relying on Regulation D for one of the reasons stated in Rule 505(b)(2)(iii) or Rule 506(d).

Each Issuer identified above has read this notice, knows the contents to be true, and has duly caused this notice to be signed on its behalf by the undersigned duly authorized person.

For signature, type in the signer's name or other letters or characters adopted or authorized as the signer's signature.

Issuer	Signature	Name of Signer	Title	Date
AntriaBio, Inc.	/s/ Morgan Lynn Fields	• •	Chief Accounting Officer	2017-05-30