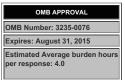
## FORM D

Notice of Exempt Offering of Securities

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



1. Issuer's Identity		
CIK (Filer ID Number)	Previous Name(s)  None	Entity Type
0001509261	Fits My Style Inc.	Corporation
Name of Issuer	AntriaBio, Inc.	C Limited Partnership
Rezolute, Inc.	FITS MY STYLE INC	C Limited Liability Company
Jurisdiction of Incorporation/Organization		C General Partnership
DELAWARE		C Business Trust
Year of Incorporation/Organiz	ation	C Other
Over Five Years Ago		L
Within Last Five Years		

- C (Specify Year)
- Yet to Be Formed

## 2. Principal Place of Business and Contact Information Name of Issuer

Rezolute, Inc.			
Street Address 1	S	treet Address 2	
1450 INFINITE DRIVE			
City	State/Province/Country	ZIP/Postal Code	Phone No. of Issuer
LOUISVILLE	COLORADO	80027	(303) 222-2128

# 3. Related Persons

First Name	Middle Name
Nevan	Charles
Street Address 2	1
s] [	ZIP/Postal Code
tive Officer Director	Promoter
	Street Address 2 State/Province/Country COLORADO

Clarification of Response (if Necessary)

Last Name	First Name	Middle Name
Huh	Hoyoung	]
Street Address 1	Street Address 2	
1450 Infinite Drive		
City	State/Province/Country	ZIP/Postal Code
Louisville	COLORADO	80027
Relationship: Execu	tive Officer Director	Promoter

Clarification of Response (if Necessary)

Last Name					
Sange i vanile		First Name		Middle Name	
Kim		Tae		Hoon	
Street Address 1			Street Address	2	
1450 Infinite Drive					
City		State/Province	/Country	ZIP/Postal Code	
Louisville		COLORADO	)	80027	
Relationship:	Execut	ive Officer	Director	Promoter	
Clarification of Respons	se (if Necessary	)			
Last Name		First Name		Middle Name	
		-			
Welch		David		<b>F.</b>	
Street Address 1			Street Address 2	2	]
1450 Infinite Drive					
City		State/Province	-	ZIP/Postal Code	
Louisville		COLORADO	)	80027	
Relationship:	Execut	ive Officer	Director	Promoter	
Last Name		First Name		Middle Name	
Street Address 1		Bailin	Street Address 2		
			Street Address		
1450 Infinite Duive			]		
1450 Infinite Drive					
City	]	State/Province		ZIP/Postal Code	
		State/Province			
City	Execut	-	)	ZIP/Postal Code	
City Louisville Relationship:	i	COLORADO		ZIP/Postal Code	
City Louisville	i	COLORADO	)	ZIP/Postal Code	
City Louisville Relationship:	i	COLORADO	)	ZIP/Postal Code	
City Louisville Relationship:	i	COLORADO	)	ZIP/Postal Code	
City Louisville Relationship: Clarification of Respons	i	ive Officer	)	ZIP/Postal Code	
City Louisville Relationship: Clarification of Respons Last Name	Ac	COLORADO ive Officer ) First Name	)	ZIP/Postal Code          80027         Promoter         Middle Name	
City Louisville Relationship: Clarification of Respons Last Name Last Name Street Address 1	Ac	COLORADO ive Officer ) First Name	Director	ZIP/Postal Code          80027         Promoter         Middle Name	
City Louisville Relationship: Clarification of Respons Last Name Labrucherie Street Address 1 1450 Infinite Drive	Ac	COLORADO         ive Officer         )         First Name         Gil	Street Address 2	ZIP/Postal Code          ZIP/Postal Code         80027         Promoter         Middle Name         2	
City Louisville Relationship: Clarification of Respons Last Name Last Name Labrucherie Street Address 1 1450 Infinite Drive City	Ac	COLORADO         ive Officer         )         First Name         Gil         State/Province	Director Director Street Address 2 /Country	ZIP/Postal Code          ZIP/Postal Code         Middle Name         ZIP/Postal Code	
City Louisville Relationship: Clarification of Respons Last Name Labrucherie Street Address 1 1450 Infinite Drive	Ac	COLORADO         ive Officer         )         First Name         Gil	Director Director Street Address 2 /Country	ZIP/Postal Code          ZIP/Postal Code         80027         Promoter         Middle Name         2	
City Louisville Relationship: Clarification of Respons Last Name Last Name Labrucherie Street Address 1 1450 Infinite Drive City	se (if Necessary	COLORADO         ive Officer         )         First Name         Gil         State/Province	Director Director Street Address 2 /Country	ZIP/Postal Code          ZIP/Postal Code         Middle Name         ZIP/Postal Code	
City Louisville Relationship: Clarification of Respons Last Name Last Name Labrucherie Street Address 1 1450 Infinite Drive City Louisville Relationship:	se (if Necessary	COLORADO         ive Officer         )         First Name         Gil         State/Province         COLORADO         ive Officer	Street Address 2	ZIP/Postal Code          80027         Promoter         Middle Name         2         ZIP/Postal Code         80027	
City Louisville Relationship: Clarification of Respons Last Name Last Name Labrucherie Street Address 1 1450 Infinite Drive City Louisville	se (if Necessary	COLORADO         ive Officer         )         First Name         Gil         State/Province         COLORADO         ive Officer	Street Address 2	ZIP/Postal Code          80027         Promoter         Middle Name         2         ZIP/Postal Code         80027	
City Louisville Relationship: Clarification of Respons Last Name Last Name Labrucherie Street Address 1 1450 Infinite Drive City Louisville Relationship:	se (if Necessary	COLORADO         ive Officer         )         First Name         Gil         State/Province         COLORADO         ive Officer	Street Address 2	ZIP/Postal Code          80027         Promoter         Middle Name         2         ZIP/Postal Code         80027	
City Louisville Relationship: Clarification of Respons Last Name Last Name Labrucherie Street Address 1 1450 Infinite Drive City Louisville Relationship:	se (if Necessary	COLORADO         ive Officer         )         First Name         Gil         State/Province         COLORADO         ive Officer	Street Address 2	ZIP/Postal Code          80027         Promoter         Middle Name         2         ZIP/Postal Code         80027	

Street Address 2

Street Address 1

1450 Infinite Drive					
City		State/Province/C	Country	ZIP/Pos	stal Code
Louisville		COLORADO		80027	
Relationship:	Execut	tive Officer	Director		Promoter
Clarification of Response	(if Necessary	<i>i</i> )			
Last Name		First Name		Middle	Name
Fields		Morgan		Lynn	
Street Address 1			Street Address 2		
1450 Infinite Drive					
City		State/Province/C	Country	ZIP/Pos	stal Code
Louisville		COLORADO		80027	
<u> </u>					
Relationship:	Execut	tive Officer	Director		Promoter
Kelationship.	Execut	live Onicer	Director		1 I I I I I I I I I I I I I I I I I I I
Clarification of Response	(if Necessary	<i>i</i> )			
Last Name		First Name		Middle	Name
Deperro		Michael		R.	
Street Address 1			Street Address 2		
1450 Infinite Drive					
City		State/Province/C	Country	ZIP/Pos	stal Code
Louisville		COLORADO		80027	
Relationship:	Execut	tive Officer	Director		Promoter
Clarification of Response	(if Necessary	<i>i</i> )			· <u> </u>
Last Name		First Name		Middle	Name
Roberts		Brian			
Street Address 1			Street Address 2		
1450 Infinite Drive					
City		State/Province/C	Country	ZIP/Po	stal Code
Louisville	]	COLORADO	· •	80027	
Louisville		COLORADO		00027	
Relationship:	Execut	tive Officer	Director		Promoter
Clarification of Response	(if Necessary	<i>i</i> )			
Last Name		First Name		Middle	Name
Liffick		Noopur		Batsh	a
Street Address 1	1	. L <u></u>	Street Address 2	u <u>La an</u>	
1450 Infinite Drive					
City		State/Province/O	ountry	ZID/Do	stal Code
Louisville		1	Junity		
Louisville		COLORADO		80027	
Relationship:	Execut	tive Officer	Director		Promoter

## 4. Industry Group

## C Agriculture

### **Banking & Financial Services**

- C Commercial Banking
- C Insurance
- C Investing
- C Investment Banking
- C Pooled Investment Fund
- Other Banking & Financial C Services

## C Business Services

## Energy

- C Coal Mining
- C Electric Utilities
- C Energy Conservation
- C Environmental Services
- C Other Energy

# C Oil & Gas

## 5. Issuer Size

### **Revenue Range**

- C No Revenues
- C \$1 - \$1,000,000
- C \$1,000,001 - \$5,000,000
- C \$5,000,001 - \$25,000,000
- \$25,000,001 \$100,000,000 C
- C Over \$100,000,000
- Decline to Disclose
- C Not Applicable

### Health Care Biotechnology

C Health Insurance

C

C Manufacturing

Real Estate

C

C

C Commercial

C Construction

Residential

C Other Real Estate

**REITS & Finance** 

Pharmaceuticals

O Other Health Care

- C Hospitals & Physicians

  - C Telecommunications
  - C Other Technology

### Travel

- C Airlines & Airports
- C Lodging & Conventions
- C Tourism & Travel Services
- C Other Travel
- C Other

- 0 C Decline to Disclose

C

C

0

0

0

0 Not Applicable

Aggregate Net Asset Value Range

\$1 - \$5,000,000

No Aggregate Net Asset Value

\$5,000,001 - \$25,000,000

\$25,000,001 - \$50,000,000

\$50,000,001 - \$100,000,000

Over \$100,000,000

	<ol><li>Federal Exemption(s) and Exclusion(s) Claimed (select all that apply)</li></ol>						
	Rule 504(b)(1) (not (i), (ii) or (iii))		□ Rule 505				
	Rule 504 (b)(1)(i)		Rule 506(b)				
	Rule 504 (b)(1)(ii)		Rule 506(c)				
Π	Rule 504 (b)(1)(iii)		Securities Act Section 4(a)(5)				
		Investment Company Act Section 3(c)					

7.	Type of F	iling		
Γ	New Notice	Date of First Sale	2018-01-30	First Sale Yet to Occur
•	Amendment			

8. Duration of Offering

# • Yes O No

- C Retailing C Restaurants
- Technology
  - C Computers

9.	Type(s) of Securitie	es (	Offered (s	elect al	I that ap	ply)	
	Pooled Investment Fund Interests	П	Equity				
	Tenant-in-Common Securities	•	Debt				
Γ	Mineral Property Securities	•	Option, Warra Acquire Anoth		Right to		
2	Security to be Acquired Upon Exercise of Option, Warrant or Other Right to Acquire Security	ecurity to be Acquired Upon xercise of Option, Warrant or ther Right to Acquire Other (describe)					
			Senior Secure common stoc				
10	. Business Combina	atic	on Transa	iction			
	is offering being made in connect saction, such as a merger, acquisi				C Yes	• No	
	ification of Response (if Necessar		or enemange on				
	¥				1		
					-		
11	. Minimum Investme	ent					
Min	imum investment accepted from a		_			USI	)
inve	stor		φ []				, ,
12	. Sales Compensati	on					
Rec	ipient			Recipient C	CRD Number		None None
	rookline Capital Markets, a di curities, LLC	visio	n of CIM	120852			
			»T	(Associat	ed) Broker or	Dealer CI	
(As	sociated) Broker or Dealer		None	Number			None
Str	eet Address 1			Street A	ddress 2		
68	898 S. University Blvd.						
City	ÿ		Stat	e/Province/C	Country		ZIP/Postal Code
C	entennial		С	OLORADO	)		80122
Stat	e(s) of Solicitation 🔲 Al	l Sta	tes 🗖 Fo	oreign/Non-U	JS		
AL	ABAMA						
CA	LIFORNIA						
CC	LORADO						
CC	NNECTICUT						
FL	ORIDA						
GE	ORGIA						
ILI	LINOIS						
MA	ASSACHUSETTS						
M	ARYLAND						
NE	W JERSEY						
NE	VADA						
NE	W YORK						
TE	XAS						
W	ASHINGTON						
WI	SCONSIN						

Total Offering Amount \$ 6000000 USD	□ Indefinite
Total Amount Sold \$ 4800000 USD	
Total Remaining to be \$ 1200000 USD	□ Indefinite
Clarification of Response (if Necessary)	
14. Investors	
14. 117631013	
Select if securities in the offering have been or may do not qualify as accredited investors, Number of such non-accredited investors who alre offering Regardless of whether securities in the offering hav to persons who do not qualify as accredited investo number of investors who already have invested in	ady have invested in the /e been or may be sold rs, enter the total
15. Sales Commissions & Finders' I	
13. Sales Commissions & Finders	
Provide separately the amounts of sales commissions and fin expenditure is not known, provide an estimate and check the	
Sales Commissions \$ 202300	USD Estimate
Finders' Fees \$	USD Estimate
Clarification of Response (if Necessary)	
In addition to cash commission, agent shall also receive	e up to 289,000 warrants.
16. Use of Proceeds	
Provide the amount of the gross proceeds of the offering that any of the persons required to be named as executive officers. If the amount is unknown, provide an estimate and check the \$ Clarification of Response (if Necessary)	, directors or promoters in response to Item 3 above.
Circulation and Culturistics	
Signature and Submission	
Please verify the information you have entered a before signing and clicking SUBMIT below to file Terms of Submission	
In submitting this notice, each Issuer named above is:	notice is filed of the offering of convities
<ul> <li>Notifying the SEC and/or each State in which this described and undertaking to furnish them, upon offerees.</li> </ul>	
Irrevocably appointing each of the Secretary of the legally designated officer of the State in which the i and any State in which this notice is filed, as its agg these persons may accept service on its behalf, of a agreeing that such service may be made by register action, administrative proceeding, or arbitration b jurisdiction of the United States, if the action, proc in connection with the offering of securities that is directly or indirectly, upon the provisions of: (i) th Act of 1934, the Trust Indenture Act of 1939, the II Investment Advisers Act of 1940, or any rule or reglaws of the State in which the issuer maintains its p this notice is filed.	Issuer maintains its principal place of business nts for service of process, and agreeing that ny notice, process or pleading, and further eed or certified mail, in any Federal or state rought against it in any place subject to the eeding or arbitration (a) arises out of any activity the subject of this notice, and (b) is founded, e Securities Act of 1933, the Securities Exchange vestment Company Act of 1940, or the gulation under any of these statutes, or (ii) the

 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
Rezolute, Inc.	/s/ Morgan Lynn Fields	Morgan Lynn Fields	Chief Accounting Officer	2018-04-24