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

OMB APPROVAL						
OMB Number:	3235-0287					
Estimated average burden						
nours per response	e 0.5					

longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

### STATEMENT OF CHANGES IN 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

Print or Typ	e Response	s)															
Name and Address of Reporting Person * Opko Health, Inc.					2. Issuer Name and Ticker or Trading Symbol Sorrento Therapeutics, Inc. [SRNE]							5. Relation	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)  Director X 10% Owner				
(Last) (First) (Middle) 4400 BISCAYNE BLVD.				3. Date of Earliest Transaction (Month/Day/Year) 11/06/2013								(give title belo		Other (specify l	pelow)		
(Street) MIAMI, FL 33137				4. If	4. If Amendment, Date Original Filed(Month/Day/Year)							_X_ Form file	6. Individual or Joint/Group Filing(Check Applicable Line) _X_Form filed by One Reporting Person _Form filed by More than One Reporting Person				
(City)		(State)	(Zip)	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned													
(Instr. 3)		2. Transaction Date (Month/Day/Year)	Execut any	2A. Deemed Execution Date, if any Month/Day/Year)				(A) or Disposed of (Instr. 3, 4 and 5)		of (D)	Beneficia Reported	unt of Securities ially Owned Following d Transaction(s)		6. Ownership Form: Direct (D)	7. Nature of Indirect Beneficial Ownership		
				(Mont	Wolldi/Day/Tear)		Code	V	Amount	(A) or ount (D) Pr		(Instr. 3 and 4)			or Indirect (I) (Instr. 4)	(Instr. 4)	
Common	Stock		11/06/2013				S		114,962	2 D	\$ 9.0 (1)	2,229,1	46 (1) (2)		D		
Common	Stock		11/07/2013				S		5,418	D	\$ 9.072 (2)	21 2,223,7	28		D		
Reminder: I	Report on a	separate line	for each class of se	curities	beneficial	ly o	wned dire	ectly	or								
·								cor	ntained i	n this	form a	to the colle are not req rently valid	uired to re	spond un	less	EC 1474 (9- 02)	
			Table II -		tive Secu		•		•			ially Owned					
1. Title of Derivative Security (Instr. 3)  2. Conversion or Exercise Price of Derivative Security				Date, if	4. Transaction Code (Instr. 8)		of		. Date Exercisable nd Expiration Date Month/Day/Year)		e Ai Ui Se	Title and mount of inderlying ecurities nstr. 3 and		9. Number of Derivative Securities Beneficially Owned Following Reported Transactions (Instr. 4)	Ownersh Form of Derivativ Security: Direct (D or Indirect	Ownership (Instr. 4) O)	
					Code	v	(A) (D)		ite ercisable	Expira Date	tion Ti	Amount or itle Number of Shares					
Repor	ting O	wners															
			D.L.				1										

	Relationships						
Reporting Owner Name / Address	Director	10% Owner	Officer	Other			
Opko Health, Inc. 4400 BISCAYNE BLVD. MIAMI, FL 33137		X					

## **Signatures**

Adam Logal, Vice President-Finance, Chief Accounting Officer, and Treasurer	11/08/2013
Signature of Reporting Person	Date

# **Explanation of Responses:**

- \* If the form is filed by more than one reporting person, see Instruction 4(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).

and sold at each separate price.

Represents the weighted average purchase price for the transactions as reported on this line. The range of prices for the transactions reported on this line was \$8.75 to (2) \$9.15. The reporting person will provide to the Commission, the issuer and any stockholder, upon request, full information regarding the number of shares purchased and sold at each separate price

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.