# FORM 4

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

OMB APPROVAL					
OMB Number: 3235-028					
stimated average burden					
ours per response	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 Ty	pe Response	es)															
1. Name and Address of Reporting Person *- Yu Alice Lin-Tsing				2. Issuer Name <b>and</b> Ticker or Trading Symbol Opko Health, Inc. [OPK]								5	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)  X Director 10% Owner				
OPKO HEALTH, INC., 4400 BISCAYNE BLVD.				3. Date of Earliest Transaction (Month/Day/Year) 06/05/2014								-		ive title below)	Oth	ner (specify bel	ow)
(Street) MIAMI, FL 33137				4. If Amendment, Date Original Filed(Month/Day/Year)									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 Acqui							ecurities	s Acquir	red, Disposed of, or Beneficially Owned				
1.Title of Security (Instr. 3)  2. Transaction Date (Month/Day/Year		2A. Deemed Execution Date, if any (Month/Day/Year		f Code (Instr.	8)	(A	4. Securities Acq (A) or Disposed 6 (Instr. 3, 4 and 5)		of (D) Owned Follo		(-)		Form:	7. Nature of Indirect Beneficial Ownership (Instr. 4)			
Common	Stock		06/05/2014				Coo			nount ),000	Δ	Price \$ 1.23	40,000			(Instr. 4) D	
contained in this form are not required to respond unless the form displays a currently valid OMB control number.  Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned  (e.g. puts calls warrants entions convertible securities)																	
Security	Conversion	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any	xecution Date, if Transaction of Code Derivative (Month/Day/Year) (Instr. 8) Securities Expiration Date (Month/Day/Year)		7. Title Amour Underl Securit	7. Title and Amount of Underlying Securities (Instr. 3 and 4)		9. Number of Derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Owners Form of Derivat Security Direct ( or Indir	Ownership (Instr. 4)  D) ect						
				Code	v	(A)	(D)	Date Exerci	sable	Expi Date	ration	Title	or Number of Shares	er			
Stock Option (Right to Buy)	\$ 1.23	06/05/2014		М			20,000	04/21	/2010	0 04/2	20/2016	Comm	120.00	0 \$0	0	D	

## **Reporting Owners**

Reporting Owner Name / Address	Relationships						
Reporting Owner Name / Address	Director	10% Owner	Officer	Other			
Yu Alice Lin-Tsing OPKO HEALTH, INC. 4400 BISCAYNE BLVD. MIAMI, FL 33137	Х						

## **Signatures**

Adam Logal, Attorney-in-Fact	06/06/2014
**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).

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

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.