| FORM 4 |
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(Print or Type Perpense)

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| Check this box if no |
| longer subject to |
| Section 16. Form 4 or |
| Form 5 obligations |
| may continue. See |
| Instruction 1(b). |

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

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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

| 1. Name and Address of Reporting Person – Yu Alice Lin-Tsing | 2. Issuer Name and Opko Health, Inc. | | Гradi | ng Symb | ol | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner | | | |
|---|--|--|-------|---------|--------|--|---|-------------------------|-------------|
| ODVO VELLEV DIG 1400 DIGGLIDIE DI VE | 3. Date of Earliest Transaction (Month/Day/Year) 06/18/2015 | | | | | | ther (specify belo | 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 Acqu | | | | | | nired, Disposed of, or Beneficially Ow | ned | |
| 1. Title of Security 2. Transaction (Instr. 3) Date (Month/Day/Year | Date (Month/Day/Year) Execution Date, if any (Month/Day/Year) Code (Instr. 8) (A) or Disposed of (D (Instr. 3, 4 and 5) | | | | of (D) | Owned Following Reported Transaction(s) (Instr. 3 and 4) | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | Beneficial Ownership | |
| Reminder: Report on a separate line for each class of securitie | s beneficially owned | | | - | | nd to f | the collection of information | SEC | 1474 (9-02) |

| Persons who respond to the collection of information | SE |
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| 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, options, convertible securities) | | | | | | | | | | | | | | | |
|--|-------------|------------------|--------------------|------------|--------------|--------------------|-------------------------------|---------------|-----------------------|------------------|--------------|--------------|------------------------------|-------------------|-------------|
| 1. Title of | 2. | 3. Transaction | 3A. Deemed | 4. | 5. Number | | 6. Date Exercisable and | | 7. Title and | | 8. Price of | 9. Number of | 10. | 11. Nature | |
| Derivative | Conversion | Date | Execution Date, if | Transact | ion | of Expira | | Expiration Da | Expiration Date | | Amount of | | Derivative | Ownership | of Indirect |
| Security | or Exercise | (Month/Day/Year) | | Code | | Derivativ | Derivative (Month/Day/Year) U | | Underlying Sec | | Security | Securities | Form of | Beneficial | |
| · · · · | Price of | | (Month/Day/Year) | (Instr. 8) |) | Securitie | | | Securities (Instr. 5) | | | Derivative | | | |
| | Derivative | | | | | Acquired | 1 | | | (Instr. 3 and 4) | | | | | (Instr. 4) |
| | Security | | | | | (A) or | 1 0 | | | | | | 0 | Direct (D) | |
| | | | | | | Disposed | 1 01 | | | | | | 1 | or Indirect | |
| | | | | | | (D) (Instr. 3, | 4 | | | | | | Transaction(s) (Instr. 4) | (1) (Instr. 4) | |
| | | | | | | (1130.5) and 5) | ч, | | | | | | (IIISU. 4) | (11150.4) | |
| | | | | | | | - | | | | A | | | | |
| | | | | | | | | | | | Amount or | | | | |
| | | | | | | | | | Expiration | Title | Number | | | | |
| | | | | | | | | Exercisable | Date | 1100 | of | | | | |
| | | | | Code | \mathbf{V} | (A) | (D) | | | | Shares | | | | |
| Stock | | | | | | | | | | | | | | | |
| Option | | | | | | | | | | Common | | . | | - | |
| (Right to | \$ 15.43 | 06/18/2015 | | Α | | 20,000 | | 06/18/2016 | 06/17/2025 | Common Stock | 20,000 | \$ 0 | 20,000 | D | |
| Buy) | | | | | | | | | | Stock | | | | | |
| Duy) | | | | | | | | | | | | | | | |

Reporting Owners

| Demontine Original News (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 | 06/19/2015 |
|-------------------------------|------------|
| 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, 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.