FORM 4	-
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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

OMB APPROVAL OMB Number: 3235-0287 Estimated average burden hours per response... 0.5

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 F BEIER THOMAS E	2. Issuer Name and Ticker or Trading Symbol Opko Health, Inc. [OPK]						5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner				
OPKO HEALTH, INC	3. Date of Earliest Transaction (Month/Day/Year) 07/17/2015						Officer (give title below) Of	her (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)	(Zip)	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned									
1.Title of Security (Instr. 3)			Execution Date, if	Code (Instr. 8)					Owned Following Reported Transaction(s)	- · ·	7. Nature of Indirect Beneficial Ownership
			(Code	v	Amount	(A) or (D)	Price		or Indirect (I) (Instr. 4)	-
Common Stock		01/15/2015		G	v	30,227 (<u>1)</u>	D	\$ 0	0	D	
Common Stock		07/17/2015		М		20,000	А	\$ 1.78	20,000	D	
Common Stock		01/15/2015		G	v	30,227 (<u>1)</u>	A	\$ 0	130,227	I	See Footnote (2)

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

Persons who respond to the collection of information

SEC 1474 (9-02)

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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	ction of		Expiration Date		Amount of		Derivative	Derivative	Ownership	of Indirect	
Security	or Exercise	(Month/Day/Year)		Code		Derivative ((Month/Day/Year)		Underlying		Security	Securities	Form of	Beneficial
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8))	Securities		Se		Securities		(Instr. 5)	Beneficially	Derivative	Ownership
	Derivative					-	uired	((Instr. 3 and 4)				2	(Instr. 4)
	Security					(A)					0	Direct (D)			
						-	osed of						1	or Indirect	
						(D)							Transaction(s)	· · /	
						(Inst and	tr. 3, 4,						(Instr. 4)	(Instr. 4)	
						and	3)		1						
											Amount				
								Date	Expiration		or				
								Exercisable	Date		Number				
				Code	v	(A)	(D)				of Shares				
-				Couc	v	(A)	(D)				Shares				
Stock															
Option	¢ 1 70	07/17/2015		м			20.000	00/01/2000	07/21/2015	Common Stock	20.000	¢ 0	0	D	
(Right to	\$ 1.78	07/17/2015		М			20,000	08/01/2009	07/31/2015	Stock	20,000	\$ 0	0	D	
Buy)															
.,															

Reporting Owners

Demontine Original News (Address	Relationships							
Reporting Owner Name / Address	Director	10% Owner	Officer	Other				
BEIER THOMAS E OPKO HEALTH, INC. 4400 BISCAYNE BLVD. MIAMI, FL 33137	х							

Signatures

Adam Logal, Attorney-In-Fact	07/20/2015
**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).

(1) The shares were gifted by the reporting person on January 15, 2015, to a trust for the benefit of the reporting person and his spouse.

(2) Securites held by the Thomas E. Beier and Evelyn M. Beier Trust FBO Thomas E. Beier Trust.

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.