FORM 4

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C.	20549	
wasnington,	D.C.	20549	

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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

	tion 1(b).	nuc. See		Filed							es Exchang npany Act o		f 1934			nours	s per re	esponse:	0.5
1. Name and Address of Reporting Person* Rowe Michael M				2. Issuer Name and Ticker or Trading Symbol EYENOVIA, INC. [EYEN]								(Chec	k all app Direc			10% O	wner		
	(Last) (First) (Middle) C/O EYENOVIA, INC. 295 MADISON AVENUE, SUITE 2400					3. Date of Earliest Transaction (Month/Day/Year) 09/13/2021								X	Officer (give title below) Chief Operating			Other (specify below) ag Officer	
(Street) NEW Y(ORK N	Y 1	0017 Zip)										6. Indi Line) X	'					
		Table	I - Nor	n-Deriva	tive S	Secu	rities	Acq	uired,	Dis	posed of	, or B	enefi	cially	y Own	ed			
1. Title of Security (Instr. 3) 2. Transac Date (Month/Date)				Execution I ly/Year) if any		ecution Date,		3. Transaction Code (Instr. 8) 4. Securities Ac Disposed Of (D) 5)				4 and Securi Benefi Owned		ties cially I Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership		
									Code	v	Amount	(A) (D)	Reported Transaction(s) (Instr. 3 and 4)						(Instr. 4)
Common	ommon Stock, par value \$.0001 09/13			09/13/	2021		P		1,500	A	. \$	4.4	.4 4,300			D			
		Tal									osed of, onvertib				Owne	d		·	
1. Title of Derivative Security (Instr. 3)	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)		4. Transaction Code (Instr. 8)		of Deriv Secu Acqu (A) o Dispo	r osed) r. 3, 4	6. Date Exercis Expiration Date (Month/Day/Yea		te	7. Title and Amount of Securities Underlying Derivative Security (Inst 3 and 4)		De Se (In	Price of erivative ecurity estr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	ly	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership t (Instr. 4)	
					Code	v	(A)	(D)	Date Exercisa	able	Expiration Date	Title	Amour or Number of Shares	er					

Explanation of Responses:

Remarks:

/s/ Michael M. Rowe

09/13/2021

** Signature of Reporting Person

Date

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

- * 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.

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB Number.