The Securities and Exchange Commission has not necessarily reviewed the information in this filing and has not determined if it is accurate and complete.

The reader should not assume that the information is accurate and complete.

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

Notice of Exempt Offering of Securities

OMB APPROVAL				
OMB Number:	3235- 0076			
Estimated burden	average			
hours per response:	4.00			

1. Issuer's Identity

0001094038GENEMAX CORPXCorporationName of IssuerEDUVERSE COMLimited PartnershipTAPIMMUNE INCGeneral PartnershipJurisdiction of Incorporation/OrganizationGeneral PartnershipNEVADAOther (Specify)Vear of Incorporation/OrganizationOther (Specify)X Over Five Years Ago Within Last Five Years (Specify Year) Yet to Be FormedOther (Specify)2. Principal Place of Business and Contact InformationStreet Address 1Street Address I source/CountryZ DY Kater Address I Suffer Province/CountryZIP/PostalCodeCityState/Province/CountryZIP/PostalCodeAcKSONVILLEFLORIDA98102(206) 504-72783. Related PersonsStreet Address 2Source Address 250 N Laura StreetSuffer EXAddress 2Suffer EXAddress 250 N Laura StreetSuffer EXAddress 2Suffer EXAddress 250 N Laura StreetSuffer EXAddress 2Suffer EXAddress 250 N Laura StreetSuffer X Director PromoterZIP/PostalCodeAcksonvilleFLORIDA98102ZIP/PostalCodeJacksonvilleFLORIDA98102ZIP/PostalCodeJacksonvilleFLORIDA98102ZIP/PostalCodeJacksonvilleFLORIDA98102ZIP/PostalCodeJacksonvilleFLORIDA98102ZIP/PostalCodeJacksonvilleFLORIDA98102ZIP/PostalCodeJacksonvilleFLORIDA98102ZIP/PostalCodeJacksonvilleState/Province/Count	CIK (Filer ID Nun	nber) Previous Names	None	Entity Type
Name of IssuerEDUVERSE COMLimited Partnership Limited Liability CompanyTAPIMMUNE INCLimited Liability CompanyJurisdiction of Incorporation/OrganizationGeneral Partnership Business TrustNEVADAOther (Specify)Year of Incorporation/OrganizationOther (Specify)Year of Incorporation/OrganizationOther (Specify)X Over Five Years Ago 	<u>0001094038</u>		CORP	X Corporation
TAPIMMUNE INC     Limited Liability Company General Parmership       Jurisdiction or Incorporation/Organization     General Parmership       NEVADA     Other (Specify)       Year of Incorporation/Organization     Uther Specify)       X Over Five Years Ago     Within Last Five Years (Specify Year) Yet to Be Formed       2. Principal Place of Business and Contact Information     Name of Issuer       Street Address and Contact Information       Name of Issuer       Street Address 1       Street Address 2       So N LAURA STREET       Street Address 2       Suite 2500       City       Street Address 2       So N Laura Street       Suite 2500       City       Street Address 2       Suite 2500	Name of Issue			-
Incorporation/Organization Business Trust Business Trust Other (Specify) Year of Incorporation/Organization X Over Five Years Ago Within Last Five Years (Specify Year) Yet to Be Formed 2. Principal Place of Business and Contact Information Name of Issuer TAPIMMUNE INC Street Address 1 Street Address 2 50 N LAURA STREET SUITE 2500 City State/Province/Country ZIP/PostalCode Phone Number of Issuer JACKSONVILLE FLORIDA 98102 (206) 504-7278 3. Related Persons Street Address 1 Street Address 2 50 N Laura Street Suite 2500 City State/Province/Country ZIP/PostalCode Wilson Glynn Street Address 1 Street Address 2 50 N Laura Street Suite 2500 City State/Province/Country ZIP/PostalCode FLORIDA 98102 City State/Province/Country SIP Relationship: X Executive Officer X Director Promoter Clarification of Response (if Necessar): City John Street Address 2 50 N Laura Street Suite 2500 City State/Province/Country SIP/PostalCode FLORIDA 98102 Relationship: X Executive Officer X Director Promoter Clarification of Response (if Necessar): Street Address 1 Street Address 2 50 N Laura Street Suite 2500 City John Street Address 1 Street Address 2 50 N Laura Street Suite 2500 City State/Province/Country SIP/PostalCode Street Address 1 Street Address 2 50 N Laura Street Suite 2500 City State/Province/Country SIP/PostalCode Street Address 1 Street Address 2 50 N Laura Street Suite 2500 City State/Province/Country SIP/PostalCode Street Address 1 Street Address 2 50 N Laura Street Suite 2500 City State/Province/Country SIP/PostalCode Street Address 1 Street Address 2 50 N Laura Street Suite 2500 City State/Province/Country SIP/PostalCode Street Address 1 Street Address 2 50 N Laura Street Suite 2500 City State/Province/Country SIP/PostalCode Street Address 1 Street Address 2 50 N Laura Street Suite 2500 City State/Province/Country SIP/PostalCode Street Address 1 Street Address 2 50 N Laura Street Suite 2500 City State/Province/Country SIP/PostalCode Street Address 2 Street Address	TAPIMMUNE INC			-
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	50 N Laura Street	Suite 2500		
	City	State/Prov	vince/Country	ZIP/PostalCode
Jacksonville FLORIDA 98102	Jacksonville	FLORIDA	981	.02

Relationship: X Executive Officer X Director Promoter

Clarification of Response (if Necessary):

Last Name	First Name	Middle Name
Laskow-Pooley	David	
Street Address 1	Street Address 2	
50 N Laura Street	Suite 2500	
City	State/Province/Country	ZIP/PostalCode
Jacksonville	FLORIDA	98102
<b>Relationship:</b> Executive Officer X	Director Promoter	
Clarification of Response (if Necessar	y):	
Last Name	First Name	Middle Name
Reddish	Mark	
Street Address 1	Street Address 2	
50 N Laura Street	Suite 2500	
City	State/Province/Country	ZIP/PostalCode
Jacksonville	FLORIDA	98102
<b>Relationship:</b> Executive Officer X	Director Promoter	
Clarification of Response (if Necessar	y):	
Last Name	First Name	Middle Name
Grisewood	Sherry	
Street Address 1	Street Address 2	
50 N Laura Street	Suite 2500	
City	State/Province/Country	ZIP/PostalCode
Jacksonville	FLORIDA	98102
<b>Relationship:</b> Executive Officer X	Director Promoter	
Clarification of Response (if Necessar	y):	
Last Name	First Name	Middle Name
Wasserman	Frederick	
Street Address 1	Street Address 2	
50 N Laura Street		
<b>City</b> Jacksonville	State/Province/Country FLORIDA	ZIP/PostalCode 98102
<b>Relationship:</b> Executive Officer X		98102
Kelationship. Executive Officer A	Director Promoter	
Clarification of Response (if Necessar	y):	
4. Industry Group		
Agriculture	Health Care	Retailing
Banking & Financial Services	X Biotechnology	Restaurants
Commercial Banking	Health Insurance	Technology
Insurance	Hospitals & Physicians	Computers
Investing	Pharmaceuticals	Telecommunications
Investment Banking		
Pooled Investment Fund	Other Health Care	Other Technology
Is the issuer registered as an investment company under	Manufacturing	Travel
the Investment Company under	Real Estate	Airlines & Airports
Act of 1940?	Commercial	Lodging & Conventions
Yes No	Construction	Tourism & Travel Services
Other Banking & Financial Serv	ices REITS & Finance	Other Travel

Business ServicesResidentialOtherFungyOther Real EstateCoal MiningCoal MiningElectric UtilitiesImage: ConservationEnergy ConservationImage: ConservationImage: ConservationEnvironmental ServicesImage: ConservationImage: ConservationOil & GasImage: ConservationImage: Conservation5. Issuer SizeImage: ConservationImage: Conservation

Revenue Range	OR	Aggregate Net Asset Value Range
X No Revenues		No Aggregate Net Asset Value
\$1 - \$1,000,000		\$1 - \$5,000,000
\$1,000,001 - \$5,000,000		\$5,000,001 - \$25,000,000
\$5,000,001 - \$25,000,000		\$25,000,001 - \$50,000,000
\$25,000,001 - \$100,000,000		\$50,000,001 - \$100,000,000
Over \$100,000,000		Over \$100,000,000
Decline to Disclose		Decline to Disclose
Not Applicable		Not Applicable

6. Federal Exemption(s) and Exclusion(s) Claimed (select all that apply)

	Investment Company Act Section 3(c)		
Rule 504(b)(1) (not (i), (ii) or (iii))	Section 3(c)(1)	Section 3(c)(9)	
Rule 504 (b)(1)(i) Rule 504 (b)(1)(ii)	Section 3(c)(2)	Section 3(c)(10)	
Rule 504 (b)(1)(iii)	Section 3(c)(3)	Section 3(c)(11)	
Rule 505	Section 3(c)(4)	Section 3(c)(12)	
X Rule 506(b)	Section 3(c)(5)	Section 3(c)(13)	
Rule 506(c) Securities Act Section 4(a)(5)	Section 3(c)(6)	Section 3(c)(14)	
	Section 3(c)(7)		

- 7. Type of Filing
- X New Notice Date of First Sale 2016-08-11 First Sale Yet to Occur Amendment
- 8. Duration of Offering

Does the Issuer intend this offering to last more than one year? Yes X No

9. Type(s) of Securities Offered (select all that apply)

X Equity	Pooled Investment Fund Interests
Debt	Tenant-in-Common Securities
X Option, Warrant or Other Right to Acquire Another Security	Mineral Property Securities
X Security to be Acquired Upon Exercise of Option, Warrant or Other Right to Acquire Security	Other (describe)

10. Business Combination Transaction

Clarification of Response (if Necessary):

11. Minimum Investment

Minimum investment accepted from any outside investor \$0 USD

12. Sales Compensation

Recipient		Recipient CRD Number	None	
GP Nuremenkari Inc.		153480		
(Associated) Broker or Dealer X None		(Associated) Broker or D	ealer CRD Number X None	
None		None		
Street Address 1		Street A	Address 2	
18 East 41st Street		Suite 1902		
City		State/Province/Country		ZIP/Postal Code
New York		NEW YORK		10017
State(s) of Solicitation (select all that apply) Check "All States" or check individual States	All States	Foreign/non-US		
NEW YORK				

13. Offering and Sales Amounts

Total Offering AmountUSDor X IndefiniteTotal Amount Sold\$0 USDTotal Remaining to be SoldUSDor X Indefinite

Clarification of Response (if Necessary):

The Issuer and the holders of warrants entered into an amendment to their warrants for additional consideration consisting of shares of common stock and additional warrants to purchase common stock.

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14. Investors

Select if securities in the offering have been or may be sold to persons who do not qualify as accredited investors, and enter the number of such non-accredited investors who already have invested in the offering. Regardless of whether securities in the offering have been or may be sold to persons who do not qualify as accredited investors, enter the total number of investors who already have invested in the offering:

15. Sales Commissions & Finder's Fees Expenses

Provide separately the amounts of sales commissions and finders fees expenses, if any. If the amount of an expenditure is not known, provide an estimate and check the box next to the amount.

Sales Commissions	\$245,000 USD	Estimate
Finders' Fees	\$0 USD	Estimate

Clarification of Response (if Necessary):

16. Use of Proceeds

Provide the amount of the gross proceeds of the offering that has been or is proposed to be used for payments to any of the persons required to be named as executive officers, directors or promoters in response to Item 3 above. If the amount is unknown, provide an estimate and check the box next to the amount.

\$0 USD Estimate

Clarification of Response (if Necessary):

Signature and Submission

Please verify the information you have entered and review the Terms of Submission below before signing and clicking SUBMIT below to file this notice.

Terms of Submission

In submitting this notice, each issuer named above is:

- Notifying the SEC and/or each State in which this notice is filed of the offering of securities described and undertaking to furnish them, upon written request, in the accordance with applicable law, the information furnished to offerees.\*
- Irrevocably appointing each of the Secretary of the SEC and, the Securities Administrator or other legally designated officer of the State in which the issuer maintains its principal place of business and any State in which this notice is filed, as its agents for service of process, and agreeing that these persons may accept service on its behalf, of any notice, process or pleading, and further agreeing that such service may be made by registered or certified mail, in any Federal or state action, administrative proceeding, or arbitration brought against the issuer in any place subject to the jurisdiction of the United States, if the action, proceeding or arbitration (a) arises out of any activity in connection with the offering of securities that is the subject of this notice, and (b) is founded, directly or indirectly, upon the provisions of: (i) the Securities Act of 1933, the Securities Exchange Act of 1934, the Trust Indenture Act of 1939, the Investment Company Act of 1940, or the Investment Advisers Act of 1940, or any rule or regulation under any of these statutes, or (ii) the laws of the State in which the issuer maintains its principal place of business or any State in which this notice is filed.
- Certifying that, if the issuer is claiming a Regulation D exemption for the offering, the issuer is not disqualified from relying on Regulation D for one of the reasons stated in Rule 505(b)(2)(iii) or Rule 506(d).

Each Issuer identified above has read this notice, knows the contents to be true, and has duly caused this notice to be signed on its behalf by the undersigned duly authorized person.

For signature, type in the signer's name or other letters or characters adopted or authorized as the signer's signature.

Issuer	Signature	Name of Signer	Title	Date
TAPIMMUNE INC	/s/ Glynn Wilson	Glynn Wilson, PH.D.	Chief Executive Officer and Director	2016-08-22

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.

\* This undertaking does not affect any limits Section 102(a) of the National Securities Markets Improvement Act of 1996 ("NSMIA") [Pub. L. No. 104-290, 110 Stat. 3416 (Oct. 11, 1996)] imposes on the ability of States to require information. As a result, if the securities that are the subject of this Form D are "covered securities" for purposes of NSMIA, whether in all instances or due to the nature of the offering that is the subject of this Form D, States cannot routinely require offering materials under this undertaking or otherwise and can require offering materials only to the extent NSMIA permits them to do so under NSMIA's preservation of their anti-fraud authority.