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

OMB APPROVAL

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

Notice of Exempt Offering of Securities

1. Issuer's Identity					
	Dro	evious			
CIK (Filer ID Number)		mes	None		Entity Type
0001505497	Ste	em Cell Assura	nce, Inc.		X Corporation
Name of Issuer	Tra	axxec Inc.			Limited Partnership
BioRestorative Therapies, Inc.					H
Jurisdiction of Incorporation/Organi	ization				Limited Liability Company
DELAWARE					General Partnership
Year of Incorporation/Organization					Business Trust
X Over Five Years Ago					Other (Specify)
Within Last Five Years (Specify	Year)				
Yet to Be Formed					
2. Principal Place of Business an	d Contact Information	n			
Name of Issuer					
BioRestorative Therapies, Inc.					
Street Address 1			Street Address 2		
40 Marcus Drive			Suite One		
City	State/Province/Coun	trv	ZIP/PostalCode		Phone Number of Issuer
Melville	NEW YORK	- ,	11747		631-760-8100
3. Related Persons					
Last Name	First Na			Middle No	
Last Name Weinreb	First Nar Mark	ne		Middle Na	me
Street Address 1	Street A	ddraee 2			
c/o 40 Marcus Drive	Suite One				
City		ovince/Count	rv.	ZIP/Posta	ICode
Melville	NEW YO		y ,	11747	loode
Relationship: X Executive Officer					
Clarification of Response (if Necess	sary):				
Chief Executive Officer, Chairman of t	he Board and President				
Last Name	First Nar	me		Middle Na	me
Radov	A.			Jeffrey	
Street Address 1	Street A	ddress 2			
8 Walworth Avenue					
City	State/Pr	ovince/Count	ry	ZIP/Postal	lCode
Scarsdale	NEW YO)RK		10583	
Relationship: Executive Officer	X Director Promoter				
Clarification of Response (if Necess	sary):				
Last Name	First Nar	me		Middle Na	me
Clyde	Mandy			MIGGIC NA	
Street Address 1	Street A	ddress 2			
c/o 40 Marcus Drive	Suite One				
City		ovince/Count	ry	ZIP/Posta	lCode
Melville	NEW YO		-	11747	
Relationship: X Executive Officer	Director Promoter				

Clarification of Response (if Necessary):					
Vice President of Operations and Secretary					
Last Name	First Name	Middle Name			
Silva	Francisco				
Street Address 1	Street Address 2				
c/o 40 Marcus Drive	Suite One				
City	State/Province/Country	ZIP/PostalCode			
Melville Relationship: X Executive Officer Director	NEW YORK Promoter	11747			
Clarification of Response (if Necessary):	Tomoto				
Vice President of Research and Development and As	sistant Secretary				
Last Name	First Name	Middle Name			
Tonna	Paul	Jude			
Street Address 1 69 Chichester Road	Street Address 2				
City	State/Province/Country	ZIP/PostalCode			
Huntington	NEW YORK	11743			
Relationship: Executive Officer X Director		11745			
Clarification of Response (if Necessary):					
Last Name	First Name	Middle Name			
Ryan	Charles	S.			
Street Address 1	Street Address 2				
1302 Ridge Road					
City	State/Province/Country	ZIP/PostalCode			
Laurel Hollow	NEW YORK	11791			
Relationship: Executive Officer Director	Promoter				
Clarification of Response (if Necessary):					
Last Name	First Name	Middle Name			
Field	Edward	L.			
Street Address 1	Street Address 2				
c/o 40 Marcus Drive	Suite One				
City	State/Province/Country	ZIP/PostalCode			
Melville	NEW YORK	11747			
Relationship: X Executive Officer Director Promoter					
Clarification of Response (if Necessary):					
President, Disc/Spine Division					
Last Name	First Name	Middle Name			
Desmarais	John	M.			
Street Address 1	Street Address 2				
230 Park Avenue					
City	State/Province/Country	ZIP/PostalCode			
New York	NEW YORK	10169			
Relationship: Executive Officer X Director	Promoter				
Clarification of Response (if Necessary):					
Last Name	First Name	Middle Name			
Catell	Robert	B.			
Street Address 1	Street Address 2				
62 Osborne Road					
City	State/Province/Country	ZIP/PostalCode			
Garden City	NEW YORK	11530			
Relationship: Executive Officer X Director	Promoter				
Clarification of Response (if Necessary):					

4. Industry Group				
Agriculture	Health Care	Retailing		
Banking & Financial Services	X Biotechnology			
Commercial Banking	Health Insurance	Restaurants		
Insurance		Technology		
Investing	Hospitals & Physicians	Computers		
Investment Banking	Pharmaceuticals	Telecommunications		
Pooled Investment Fund	Other Health Care	Other Technology		
Is the issuer registered as	Manufacturing	Travel		
an investment company under the Investment Company	Real Estate	Airlines & Airports		
Act of 1940?	Commercial	Lodging & Conventions		
∐Yes ∐No	Construction	Tourism & Travel Services		
Other Banking & Financial Services	REITS & Finance			
Business Services	Residential	☐ Other Travel		
Energy		Other		
Coal Mining	Other Real Estate			
Electric Utilities				
Energy Conservation				
Environmental Services				
∐Oil & Gas				
Other Energy				
5. Issuer Size				
	A serve seate Nest	Accet Value Dance		
Revenue Range OR No Revenues		: Asset Value Range te Net Asset Value		
X \$1 - \$1,000,000	No Aggregate Net Asset Value			
\$1,000,001 - \$5,000,000	片	- \$25,000,000		
\$5,000,001 - \$25,000,000	H	1 - \$50,000,000		
\$25,000,001 - \$100,000,000	님	1 - \$100,000,000		
Over \$100,000,000	Over \$100,0			
Decline to Disclose	Decline to Disclose			
Not Applicable	Not Applicable			
6. Federal Exemption(s) and Exclusion(s) Claimed (select all that apply)				
o. Federal Exemption(s) and Exclusion(s)	Ciaimed (Select all that app	ny)		
	Investme	ent Company Act Section 3(c)		
Rule 504(b)(1) (not (i), (ii) or (iii))	Section 3	3(c)(1) Section 3(c)(9)		
Rule 504 (b)(1)(i)				
Rule 504 (b)(1)(ii)	Section 3			
Rule 504 (b)(1)(iii)	Section 3	3(c)(3) Section 3(c)(11)		
Rule 505	Section 3	3(c)(4) Section 3(c)(12)		
X Rule 506(b)	Section 3	3(c)(5) Section 3(c)(13)		
∐ Rule 506(c)	Section 3	3(c)(6) Section 3(c)(14)		
Securities Act Section 4(a)(5)				
	Section 3	3(C)(7)		
7. Type of Filing				
New Notice Date of First Sale 2014-01-1	4 DEirot Solo Vot to Occur			
X Amendment	TELISI Sale Tel 10 Occur			
8. Duration of Offering				
Does the Issuer intend this offering to last m	nore than one year? X Yes	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				
Security to be Acquired Upon Exercise of Option, Warrant or Other Rig	aht to				
Acquire Security	Other (describe)				
10. Business Combination Transaction					
Is this offering being made in connection with a business combination transcream exchange offer?	nsaction, such as a merger, acquisition or Yes X No				
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	cipient CRD Number X None			
(Associated) Broker or Dealer \overline{X} None	(Associated) Broker or Dealer CRD Number \overline{X} None				
Street Address 1	Street Address 2	ZID/Daatal Cada			
City State(s) of Solicitation (select all that apply)	State/Province/Country	ZIP/Postal Code			
State(s) of Solicitation (select all that apply) Check "All States" or check individual States All States	Foreign/non-US				
13. Offering and Sales Amounts					
Total Offering Amount USD or X Indefinite					
Total Amount Sold \$14,395,044 USD					
Total Remaining to be Sold USD or X Indefinite					
Clarification of Response (if Necessary):					
14. Investors					
Select if securities in the offering have been or may be sold to persons such non-accredited investors who already have invested in the offering Regardless of whether securities in the offering have been or may be	ing. 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 ex check the box next to the amount.	penses, if any. If the amount of an expenditure is not known, provide	e an estimate and			
Sales Commissions \$0 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 executive officers, directors or promoters in response to Item 3 above. If the					
\$2,725,000 USD X Estimate					
Clarification of Response (if Necessary):					
Signature and Submission					
Please verify the information you have entered and review the Terms	s of Submission below before signing and clicking SUBMIT belo	ow 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
BioRestorative Therapies, Inc.	/s/ Mark Weinreb	Mark Weinreb	Chief Executive Officer	2016-05-05

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.