(Last)

(Street)
NEW YORK

(City)

(First)

NY

(State)

350 5TH AVENUE, SUITE 4730

(Middle)

10118

(Zip)

FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL

OMB Number: 3235-0287
Estimated average burden

0.5

hours per response:

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934

					or Se	ection	30(h)	of the I	nvestme	nt Coi	mpany Act	of 1940	<u> </u>						
		Reporting Persor /E CAPITA			<u>CO</u>	NSI		R PC	er or Tra		Symbol O SERV	/ICE	<u>.s</u>				olicable)	g Person(s) to X 10%	Issuer Owner
(Last) (First) (Middle) 350 5TH AVENUE, SUITE 4730					3. Dat	Date of Earliest Transaction (Month/Day/Year) 3/02/2017										Offic belov	er (give title w)	Othe belov	r (specify v)
(Street)  NEW YC	ORK N	Y	10118		4. If A	Amen	dment,	Date o	f Origina	l Filed	i (Month/Da	ay/Yea	r)		6. Indiv Line)	Forn Forn	n filed by One n filed by Mor	Filing (Check Reporting Per e than One Re	son
(City)	(Si	ate)	(Zip)												71	Pers	on		
		Tal	ole I - No	n-Deriva	ative S	Sec	uritie	s Acc	uired,	Dis	posed o	f, or	Bene	efic	ially	Owne	ed		
1. Title of S	Security (Inst	r. 3)		2. Transac Date (Month/Da		Exe if a			3. Transa Code ( 8)		4. Securiti Disposed	es Acq Of (D)	uired ( (Instr. :	(A) oı 3, 4 a	r ind 5)	Securi Benef	icially d Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
						Code	v	Amount (A)		) or )	Price		Transaction(s) (Instr. 3 and 4)			(111341.4)			
Common	Stock, no p	ar value		08/02/2	2017				S		5,000		D	\$3.9	9883	2,29	94,884 <sup>(1)</sup>	I	By advisory clients of Second Curve Capital, LLC
Common	Stock, no p	ar value		08/03/2	2017				S		5,000		D	\$3.9	9602	2,28	89,884 <sup>(1)</sup>	I	By advisory clients of Second Curve Capital, LLC
Common	Stock, no p	ar value		08/04/2	2017				S		5,000		D	\$3.9	9922	2,2	84,884 <sup>(1)</sup>	I	By advisory clients of Second Curve Capital, LLC
		7	able II -								sed of, onvertib					vned			
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deen Executio	ned 4	4. Transaction Code (Instr. 8)		5. Number of		6. Date Exercis Expiration Dat (Month/Day/Ye		sable and	7. Title and Amount of Securities Underlying Derivative Security (Ins and 4)		str. 3	8. Pr Deri Secu (Inst	ivative curity str. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s (Instr. 4)	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
					Code \	v	(A)	(D)	Date Exercisa		Expiration Date	Title	or	ount mber ares					
		Reporting Persor  /E CAPITA																	

1. Name and Address BROWN THO		Person*					
(Last)	(First)	(Middle)					
C/O SECOND CURVE CAPITAL, LLC							
350 5TH AVENUE, SUITE 4730							
(Street)							
NEW YORK	NY	10118					
(City)	(State)	(Zip)					

## **Explanation of Responses:**

1. These securities may be deemed to be beneficially owned by Second Curve Capital, LLC and Thomas K. Brown. Second Curve Capital, LLC is the investment manager of Second Curve Partners, LP, Second Curve Partners II, LP, Second Curve Partners International, Ltd., Second Curve Opportunity Fund, LP, Second Curve Vision Fund, LP, Second Curve Vision Fund International, Ltd. Thomas K. Brown is the managing member of Second Curve Capital, LLC. Each such Reporting Person disclaims beneficial ownership of the reported securities except to the extent of his or its pecuniary interest therein, and this report shall not be deemed an admission that such Reporting Person is the beneficial owner of the securities for purposes of Section 16 of the Securities Exchange Act of 1934, as amended, or for any other purpose.

Second Curve Capital, LLC

By: /s/ Thomas K. Brown,

08/07/2017

Managing Member /s/ Thomas K. Brown

08/07/2017

\*\* Signature of Reporting Person

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.