

(Print or Type Responses)

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

OMB APPROVAL				
OMB Number:	3235-0104			
Estimated average burden				
nours per response				

INITIAL STATEMENT OF 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

Name and Address of Reporting Person * McLaughlin Gerald W.	2. Date of Event Requiring Statement (Month/Day/Year) 10/31/2014		_	3. Issuer Name and Ticker or Trading Symbol Nemus Bioscience, Inc. [LGLRD]					
(Last) (First) (Middle) 650 TOWN CENTER DRIVE, SUITE 620	10/31/2014			4. Relationship of Issuer (Check	Reporting Persor all applicable)	Filed(Mon	5. If Amendment, Date Original Filed(Month/Day/Year)		
(Street) COSTA MESA, CA 92626			Officer (give titleOther (specify below)		6. Individ Applicable I _X_ Form fi	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) (State) (Zip)	Table I - Non-Derivative Securities Beneficially Owned								
1.Title of Security (Instr. 4)	Beneficially Owned (Instr. 4)			Form: Direct (D) or Indirect	4. Nature of Indirect Beneficial Ownership (Instr. 5)				
Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly. 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 control number. Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)									
Citle of Derivative Security 2. Date Exercisable 3. Title and		itle and A urities Und urity	· • · · · · · · · · · · · · · · · · · ·	4. Conversion or Exercise Price of Derivative	5. Ownership Form of Derivative Security: Direct	6. Nature of Indirect Beneficial Ownership (Instr. 5)			
Da Ex	tercisable Expira	Title	Amount Shares	nt or Number of Security		(D) or Indirect (I) (Instr. 5)			

Reporting Owners

	Relationships				
Reporting Owner Name / Address	Director	10% Owner	Officer	Other	
McLaughlin Gerald W. 650 TOWN CENTER DRIVE SUITE 620 COSTA MESA, CA 92626	X				

Signatures

/s/ Gerald W. McLaughlin	11/10/2014
**Signature of Reporting Person	Date

Explanation of Responses:

No securities are beneficially owned

- * If the form is filed by more than one reporting person, see Instruction 5(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.

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.