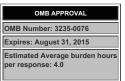
FORM D

Notice of Exempt Offering of Securities

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



011-44-161-721-1514

1. Issuer's Identity	
CIK (Filer ID Number) Previous Name(s) 🔲 None	Entity Type
0001817760 Parasol Investments Corp	Corporation
Name of Issuer	C Limited Partnership
SmartKem, Inc.	C Limited Liability Company
Jurisdiction of Incorporation/Organization	C General Partnership
DELAWARE	C Business Trust
Year of Incorporation/Organization	C Other
O 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

   SmartKem, Inc.

   Street Address 1

   Street Address 2

   MANCHESTER TECHNOLOGY CTR, HEXAGON TOWER

   City
   State/Province/Country

   ZIP/Postal Code
   Phone No. of Issuer

M9 8GQ

UNITED KINGDOM

# 3. Related Persons

MANCHESTER

Last Name			First Name			Middle	Name
Jenks			Ian				
Street Address 1				S	treet Address 2		
Manchester Technolo	gy C	tr, Hex	agon Tower Delaunays Rd., I		Blackley		
City			State/Province/Country		ZIP/Postal Code		
Manchester			UNITED KIN	GDO	М	M9 80	GQ
Relationship:	•	Execut	ive Officer	•	Director		Promoter
Last Name			First Name			Middle	Name
Bahns		Robert		]			
Street Address 1				s	treet Address 2	1	
Manchester Technolo	gy C	r, Hex	agon Tower	[	Delaunays Rd.,	Blackley	
City			State/Province/C	Count	ry	ZIP/Pos	stal Code
Manchester		UNITED KINGDOM		M9 8GQ			
Relationship:	•	Execut	ive Officer	•	Director		Promoter

Last Name	First Name		Middle Name			
King	Simon					
Street Address 1		Street Address 2	-			
Manchester Technology Ctr, Hex	agon Tower	Delaunays Rd.,	Blackley			
City	State/Province/0	Country	ZIP/Postal Code			
Manchester	UNITED KIN	GDOM	M9 8GQ			
Relationship: Execu	tive Officer	Director	Promoter			
Clarification of Response (if Necessar	y)					
Last Name	First Name		Middle Name			
de Boer	Klaas					
Street Address 1		Street Address 2	-			
Manchester Technology Ctr, Hex	agon Tower	Delaunays Rd.,	Blackley			
City	State/Province/	Country	ZIP/Postal Code			
Manchester UNITED KINGDOM		M9 8GQ				
Relationship: Execu	tive Officer	Director	Promoter			
Clarification of Response (if Necessary)						
Last Name	First Name		Middle Name			
Beck	Barbara		]			
Street Address 1		Street Address 2	1			
Manchester Technology Ctr, Hex	agon Tower	Delaunays Rd.,	Blackley			
City	State/Province/0	Country	ZIP/Postal Code			
Manchester UNITED KI		GDOM	M9 8GQ			
Relationship:	tive Officer	Director	Promoter			
-		Perse.				
Clarification of Response (if Necessar	y)					

4. Industry Group

# C Agriculture

#### Banking & Financial Services

- C Commercial Banking
- C Insurance
- C Investing
- C Investment Banking

C Pooled Investment Fund

Other Banking & Financial

#### C Business Services

#### Energy

- C Coal Mining
- C Electric Utilities
- C Energy Conservation
- C Environmental Services
- C Oil & Gas
- C Other Energy

#### C Retailing

- C Restaurants
  - Technology
  - C Computers
- C Other Health Care
- C Telecommunications
- Other Technology

#### Travel

- C Airlines & Airports
- C Lodging & Conventions
- C Tourism & Travel Services
- C Other Travel
- C Other

### 5. Issuer Size

#### **Revenue Range**

- C No Revenues
- C \$1 \$1,000,000
- C \$1,000,001 \$5,000,000
- \$5,000,001 \$25,000,000
- \$25,000,001 \$100,000,000
- Over \$100,000,000
- O Decline to Disclose
- C Not Applicable

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

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

Rule 504(b)(1) (not (i), (ii) or (iii))	Rule 505		
Rule 504 (b)(1)(i)	Rule 506(b)		
Rule 504 (b)(1)(ii)	Rule 506(c)		
Rule 504 (b)(1)(iii)	Securities Act Section 4(a)(5)		
	Investment Company Act Section 3(c)		



Amendment

## 8. Duration of Offering

Does the Issuer intend this offering to last more than one year?

C Yes O No

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

Pooled Investment Fund Interests

Tenant-in-Common Securities 🔲 Debt

\_\_\_\_\_

Health Care

0

0

0

C Manufacturing

**Real Estate** 

0

0

C

C Commercial

C Residential

Construction

**REITS & Finance** 

Other Real Estate

C Biotechnology

Health Insurance

Pharmaceuticals

Hospitals & Physicians

Mineral Property Securities	Option, Warrant or Other Right to Acquire Another Security
Security to be Acquired Upon	

	1 /	$\square$	Other (describe)
1	Other Right to Acquire	1	other (describe)
	Security		

10. Business Combination Transaction
Is this offering being made in connection with a business combination transaction, such as a merger, acquisition or exchange offer?
Clarification of Response (if Necessary)
11. Minimum Investment
Minimum investment accepted from any outside s USD USD
12. Sales Compensation
Recipient CRD Number
(Associated) Broker or Dealer I None (Associated) Broker or Dealer CRD None Number
Street Address 1 Street Address 2
City State/Province/Country ZIP/Postal Code
State(s) of Solicitation

# 13. Offering and Sales Amounts

Total Off	ering Amount	100000 USD 🗖 Indefinite				
Total An	ount Sold	100000 USD				
Total Re Sold	maining to be	0 USD 🗖 Indefinite				
Clarifica	tion of Respons	Necessary)				
Value o	f shares issued	consultant				
14. Ir	vestors					
14. Investors         Select if securities in the offering have been or may be sold to persons who do not qualify as accredited investors, 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. S	ales Con	issions & Finders' 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	\$	0
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USD

Finders' Fe	es \$ 0	USD	🔲 Estima	ıte
Clarification of Response (if Neces	sary)			
16. Use of Proceeds	;			
Provide the amount of the gross p any of the persons required to be a If the amount is unknown, provide	named as executive officers,	directors or promot	ers in respons	
	\$ 0		USD	Estimate
Clarification of Response (if Neces	sary)			

# 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, 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 it 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 the issuer maintains its principal place of business or any State in which the state in which the state in which the issuer maintains its principal place of business or any State in which the state in which the state in which the issuer maintains its principal place of business or any State in which the issuer maintains its principal place of business or any State in which the issuer maintains its principal place of business or any State in which the issuer maintains its principal place of business or any State in which the issuer maintains its principal place of business or any State in which the issuer maintains its principal place of business or any State in which the issuer maintains its principal place of business or any State in which the issuer maintains its principal place of business or any State in which the issuer maintains i
- 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 signar's signature.

Issuer	Signature	Name of Signer	Title	Date
SmartKem, Inc.	/s/ Robert Bahns	Robert Bahns	Chief Financial Officer	2022-05-27