FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT	OF CHANGES	S IN BENEFICIA	L OWNERSHIP

OMB APPRO	VAL						
OMB Number:	3235-0287						
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Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

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* Stacy Michelle				2. Issuer Name and Ticker or Trading Symbol Flex Pharma, Inc. [FLKS]					(Ch	Relationship of Reporting Person (Check all applicable) X Director			(s) to Issu			
(Last)	(First) (Middle) LEX PHARMA, INC.				3. Date of Earliest Transaction (Month/Day/Year) 07/26/2017						Officer below)	(give title		Other (sp below)	pecify	
800 BOYLSTON STREET, 24TH FLOOR				4.	If Amendment, Date of Original Filed (Month/Day/Year)						6. Individual or Joint/Group Filing (Check Applicable					
(Street)	N M	A	02199								Line	X Form f	iled by One iled by More	•	•	
(City)	(S:	tate)	(Zip)													
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																
Date			ransactior e onth/Day/Yo	Execution Date,		Code (Inst				Beneficia	s ally following	6. Owner Form: Di (D) or In (I) (Instr.	irect o direct E . 4) C	7. Nature of Indirect Beneficial Ownership		
						Code V	Amount	(A) or (D)	Price	Transact (Instr. 3 a	ion(s)			(instr. 4)		
	Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)															
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Yea	Code (ransaction of Code (Instr. Derivative		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4)	y Di or (I)	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
				Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares					
Stock Option (right to buy)	\$4.08	07/26/2017		A		12,000		(1)	07/26/2027	Common Stock	12,000	\$0	12,000		D	

Explanation of Responses:

1. The stock option will vest in 12 successive equal monthly installments measured from July 26, 2017.

Remarks:

/s/ Robert Hadfield, Attorney-07/26/2017 in-Fact

** Signature of Reporting Person Date

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.