FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C.	20549	
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Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL 3235-0287 Estimated average burden

Instruc	tion 1(b).			Filed							es Exchange npany Act of			4		liouis	perio	езропзе.	0.5]
	nd Address of und, L.P.	Reporting Person*				LE					Symbol <u>FICS IN</u>	<u>C</u> [k all app	licable)		erson(s) to Is 10% O Other (wner	
(Last) 545 DUT SUITE A		est) (N EY ROAD, N.E.	Middle)		04/2	2/2	021				/Day/Year)				below	,		below)		
(Street) ATLAN	ΓA, GA	A 3	0324		4. If A	Ame	endment,	Date o	f Origina	al Filed	d (Month/Day	y/Year)	6. Indi	Form	filed by One	e Rep	ng (Check A porting Pers an One Rep	son	
(City)	(St		Zip)	n Davissa	dives 6					Dia			20.00	ficially	. 0	- d				-
1. Title of S	Security (Ins		I - NO	2. Transac Date (Month/Da	tion	2/ E: if	A. Deeme xecution any //onth/Day	d Date,	3. Transa Code (8)	ction	4. Securitie Disposed C	s Acqı	uired (A) or	5. Amo Securit Benefic Owned	unt of ies :ially Following	Forr (D)	wnership n: Direct or Indirect nstr. 4)	7. Nature of Indirect Beneficial Ownership	
									Code	v	Amount	(A) (D)	or F	Price	Reporte Transa (Instr. 3	ction(s)			(Instr. 4)	
Common	Stock			04/22/2	2021				S ⁽¹⁾		5,000	I)	\$3.52	6,3	11,440		D ⁽²⁾		_
Common				04/23/2		L			S ⁽¹⁾		5,000	I	_	\$3.95		06,440		D ⁽²⁾		-
Common Common				04/26/2		╀			S ⁽¹⁾		7,500		-	\$4.47 \$3.84		98,940 38,940		D ⁽²⁾		-
Common	Stock	Tal	ble II -			CU	rities	Acau) Disno	osed of, o						<u> </u>	D()		_
				(e.g., pu	ts, ca		, warra	ants,	option	ns, c	onvertibl	e se	curi	ties)						
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	if any	emed on Date, /Day/Year)	4. Transa Code (8)		on of cr. Deriv Secu Acqu (A) o Disp of (D	vative irities ired r osed) r. 3, 4	6. Date Expirati (Month/	ion Da		Amou Secur Unde Deriv	rities rlying ative rity (In	Dei Sed (Ins	Price of rivative curity str. 5)	9. Number derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	у	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Natur of Indired Beneficia Ownersh (Instr. 4)	et al
					Code	v	(A)	(D)	Date Exercis	able	Expiration Date	Title	Amo or Num of Shar	ber						
	nd Address of und, L.P.	Reporting Person*																		
(Last) 545 DUT SUITE A	TCH VALL	(First) EY ROAD, N.E.		ddle)																
(Street) ATLAN	ГА,	GA	303	324																
(City)		(State)	(Zip)																
		Reporting Person*	<u>.C</u>																	
(Last)		(First)	(Mic	ddle)																

1. Name and Address of Reporting Person*

 ${\sf GA}$

(State)

30324

(Zip)

CZIRR JAMES C

SUITE A

(Street) ATLANTA,

(City)

(Last)	(First)	(Middle)
545 DUTCH VA	LLEY ROAD, N.E.	,
SUITE A		
,		
(Street)		
ATLANTA,	GA	30324
(City)	(State)	(Zip)

Explanation of Responses:

1. Shares sold pursuant to 10X Fund, LP's Rule 10b5-1 trading plan.

2. 10X Fund, L.P. has direct beneficial ownership of all the securities owned by 10X Fund, L.P. 10X Capital Management, LLC, a Florida limited liability company, is the general partner of 10X Fund, L.P., a Delaware limited partnership, and may be deemed to have indirect beneficial ownership of all or a portion of the securities owned directly by 10X Fund, L.P., but disclaims beneficial ownership of the reported securities except to the extent of its pecuniary interest therein. James C. Czirr is the manager of 10X Capital Management, LLC, and may be deemed to have indirect beneficial ownership of all or a portion of the securities owned directly by 10X Fund, L.P. and 10X Capital Management, LLC., but disclaims beneficial ownership of the reported securities except to the extent of his pecuniary interest therein.

/s/ James C. Czirr, as Managing Member of the General Partner for 10X Fund, LP

/s/ James C. Czirr, as

Managing Member of 10X 05/04/2021

Capital Management, LLC

/s/ James C. Czirr, Individually 05/04/2021

** Signature of Reporting Person Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

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.

^{*} 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).