FORM 3

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

## INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

OMB APPROVAL								
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Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

1. Name and Address Kilroy Edwin	of Reporting Person*			Event Requiri (Month/Day/` 20			Name <b>and</b> Ticker or Trading S RENS TECHNOI		INC. [ MD	VL]			
(Last) C/O MEDAVAIL 1 6665 MILLCREE  (Street) MISSISSAUGA  (City)	*	(Middle)  L5N 5M4  (Zip)					onship of Reporting Person(s Il applicable) Director Officer (give title below) Chief Execut	•	10% Owner Other (specify	below)		vidual or Joint/Grou Form filed by C	Original Filed (Month/Day/Year)  up Filing (Check Applicable Line)  one Reporting Person  fore than One Reporting Person
Table I - Non-Derivative Securities Beneficially Owned													
1. Title of Security (Instr. 4)				2. Amount Owned (In	of Securities Beneficially str. 4)	0	3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)		4. Nature of Indirect Beneficial Ownership (Instr. 5)				
Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)													
1. Title of Derivative Security (Instr. 4)		E	2. Date Exercisable and Expiration Date (Month/Day/Year)		3. Title and Amount of Securities Underly Security (Instr. 4)		Jnderlyir	ng Derivative	4. Convers or Exerc	ion ise	5. Ownership Form: Direct (D) or Indirect (I)	6. Nature of Indirect Beneficial Ownership (Instr. 5)	
			Date Expiration Date		Title	Title		Amount or Number of Shares	Price of Derivative Security		(Instr. 5)		

Explanation of Responses:

Remarks:

No securities are beneficially owned.

Ryan Ferguson, attorney-in-fact for

Edwin Kilroy

\*\* Signature of Reporting Person

11/18/2020

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.

<sup>\*</sup> 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).

## POWER OF ATTORNEY

The undersigned, as a Section 16 reporting person of MedAvail Holdings, Inc. (the "Company"), hereby constitutes and appoints Ryan Ferguson, tl

- 1. Complete and execute Forms 3, 4 and 5 and other forms and all amendments thereto as such attorney-in-fact shall in his or her discretion
- 2. Do all acts necessary in order to file such forms with the SEC, any securities exchange or national association, the Company and such otl The undersigned hereby ratifies and confirms all that said attorneys in-fact and agent shall do or cause to be done by virtue hereof. The undersigned of Attorney shall remain in full force and effect until the undersigned is no longer required to file Forms 3, 4 and 5 with respect IN WITNESS WHEREOF, the undersigned has caused this Power of Attorney to be executed as of this 18th day of November, 2020.

Signature: /s/ Edwin Kilroy
Print Name: Edwin Kilroy