

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL	
OMB Number:	3235-0104
Estimated average burden hours per response:	0.5

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

1. Name and Address of Reporting Person* <u>BAYER HEALTHCARE LLC</u> _____ (Last) (First) (Middle) 100 BAYER BOULEVARD _____ (Street) WHIPPANY NJ 07981 _____ (City) (State) (Zip)	2. Date of Event Requiring Statement (Month/Day/Year) 06/15/2023	3. Issuer Name and Ticker or Trading Symbol <u>Azitra Inc [AZTR]</u>	
		4. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director <input checked="" type="checkbox"/> 10% Owner Officer (give title below) Other (specify below)	5. If Amendment, Date of Original Filed (Month/Day/Year) 6. Individual or Joint/Group Filing (Check Applicable Line) Form filed by One Reporting Person <input checked="" type="checkbox"/> Form filed by More than One Reporting Person

Table I - Non-Derivative Securities Beneficially Owned

1. Title of Security (Instr. 4)	2. Amount of Securities Beneficially Owned (Instr. 4)	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)	2. Date Exercisable and Expiration Date (Month/Day/Year)		3. Title and Amount of Securities Underlying Derivative Security (Instr. 4)	4. Conversion or Exercise Price of Derivative Security	5. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)	6. Nature of Indirect Beneficial Ownership (Instr. 5)
	Date Exercisable	Expiration Date				
Series B Convertible Preferred Stock	(1)	(1)	Common Stock	1,307,401 ⁽²⁾	(1)	D ⁽³⁾

1. Name and Address of Reporting Person*
BAYER HEALTHCARE LLC

 (Last) (First) (Middle)
 100 BAYER BOULEVARD

 (Street)
 WHIPPANY NJ 07981

 (City) (State) (Zip)

1. Name and Address of Reporting Person*
Bayer US Holding LP

 (Last) (First) (Middle)
 100 BAYER BOULEVARD

 (Street)
 WHIPPANY NJ 07981

 (City) (State) (Zip)

1. Name and Address of Reporting Person*
Bayer World Investments B.V.

 (Last) (First) (Middle)

SIRIUSDREEF 36

(Street)

HOOFDDORP P7 2132WT

(City)

(State)

(Zip)

1. Name and Address of Reporting Person*

BAYER AKTIENGESELLSCHAFT

(Last)

(First)

(Middle)

BAYERWERK, GEBAEUDE W11

KAISER-WILHELM-ALLEE 1

(Street)

LEVERKUSEN 2M 51373

(City)

(State)

(Zip)

Explanation of Responses:

1. Each share of Series B Convertible Preferred Stock will automatically convert into one share of common stock upon the closing of the Issuer's IPO. Each share of Series B Convertible Preferred Stock has no expiration date.

2. The number of shares represented reflects a forward stock split at a ratio of 7.1-for-1 which was effectuated upon the effectiveness of the Issuer's Form S-1 (File No. 333-269876).

3. The securities reported are held directly by Bayer HealthCare LLC, a Delaware limited liability company, which is controlled by Bayer US Holding LP ("BUSH LP"), a Delaware limited partnership. Bayer World Investments B.V. ("BWI"), a Dutch private limited company, is the general partner of BUSH LP. BWI is an indirect, wholly owned subsidiary of Bayer Aktiengesellschaft, a publicly-held German stock corporation. Accordingly, Bayer Aktiengesellschaft may be deemed to be an indirect beneficial owner of the shares beneficially owned directly by Bayer HealthCare LLC.

Bayer HealthCare LLC,

By: /s/ Keith Abrams,

07/21/2023

Name: Keith Abrams,

Title: Assistant Secretary.

Bayer US Holding LP, By:

/s/ Keith Abrams, Name:

Keith Abrams, Title: VP,

07/21/2023

Head of Corp. Law and

Asst. Secretary

Bayer World Investments

B.V., By: /s/ Kati

Schnuerer, Name: Kati

07/21/2023

Schnuerer, Title: Managing

Director

Bayer Aktiengesellschaft,

By: /s/ Deny-Jean Silny,

07/21/2023

Name: Deny-Jean Silny,

Title: Head of Legal M&A

** 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 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.

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.