

UNITED STATES SECURITIES AND EXCHANGE **COMMISSION**

Washington, D.C. 20549

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

(Print or Type Responses)									
1. Name and Address of Reporting Person * TLP Investments LLC	Statem (Month	ent 1/Day/Year	•	ng 3. Issuer Name and Ticker or Trading Symbol FTE Networks, Inc. [FTNW]					
(Last) (First) (Middl 1464 PALMA BLANCA CT	e) 06/19/	06/19/2013		Person(s) to I	4. Relationship of Reporting Person(s) to Issuer			5. If Amendment, Date Original Filed(Month/Day/Year)	
(Street) NAPLES, FL 34119				(Check Director Officer (give title below)	all applicable X10% of Other below)		Filing(Ch _X_ Form t	dual or Joint/Group neck Applicable Line) filed by One Reporting Person iled by More than One Reporting	
(City) (State) (Zip)	Table I - Non-Derivative Securities Beneficially Owned					Owned Owned		
1.Title of Security (Instr. 4)		Ben		nt of Securities Illy Owned	3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)	Owner	ship	lirect Beneficial	
Series D Preferred Stock		445	5,445		D				
	respond to	o the colle	ectio	neficially owned d n of information rm displays a cu	contained	in this			
Table II - Derivative S	Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)								
1. Title of Derivative Security (Instr. 4) 2. Date Exercisa and Expiration I (Month/Day/Year)		on Date	Secu	tle and Amount of rities Underlying vative Security r. 4)	Conversio or Exercis Price of	e Form of Derivati	m of ivative	(Instr. 5)	
	Date Exercisable	Expiration Date	Title	Amount or Numb of Shares	Derivativ Security	Dire or I: (I)	urity: ect (D) ndirect tr. 5)		
D									

Reporting Owners

Reporting Owner Name / Address	Relationships				
Reporting Owner Name / Address	Director	10% Owner	Officer	Other	
TLP Investments LLC					
1464 PALMA BLANCA CT		X			
NAPLES, FL 34119					

Signatures

/s/ Amber Palleschi, Managing Member	04/15/2016		
Signature of Reporting Person	Date		

Explanation of Responses:

- * 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.

Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.