FORM 3

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

Washington, D.C. 20549

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Estimated average burden						
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## 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

Pamalli Jasanh W		2. Date of Event Requiring Statement (Month/Day/Year) 08/21/2024	3. Issuer Name and Ticker or Trading Symbol AYRO, Inc. [ AYRO ]						
(Last)	(First)	(Middle)		(Check all app		ationship of Reporting Person(s) to Issuer all applicable)		5. If Amendment, Date of Original Filed (Month/Day/Year)	
900 E. OLD SE 100	TTLERS BOUL	EVARD, SUITE		X	Officer (give title below)  Chief Financial C	10% Owner Other (specify below) Officer	Individual or Joint/Group Filing (Check Applicable Line)     X Form filed by One Reporting Person     Form filed by More than One Reporting		
(Street) ROUND ROCK	TX	78664					Person		
(City)	(State)	(Zip)							

## Table I - Non-Derivative Securities Beneficially Owned

1. Title of Security (Instr. 4)	Beneficially Owned (Instr. 4)	3. Ownership Form: Direct (D) or	<i>'</i>
		Indirect (I) (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 Un Derivative Security (Instr. 4)	Conversion or Exercise		Form: Direct (D) or	6. Nature of Indirect Beneficial Ownership (Instr. 5)
	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	Price of Derivative Security	rivative (Instr. 5)	

**Explanation of Responses:** 

No securities are beneficially owned.

/s/ Joseph Ramelli

09/10/2024

Date

\*\* Signature of Reporting Person

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.

 $<sup>^{\</sup>star}$  If the form is filed by more than one reporting person, see Instruction 5 (b)(v).

<sup>\*\*</sup> Intentional misstatements or omissions of facts constitute Federal Criminal Violations See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).