SEC Form 3 FORM 3

## UNITED STATES SECURITIES AND EXCHANGE

COMMISSION

Washington, D.C. 20549

OMB APPROVAL

3235-OMB Number: 0104

## **INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES**

Estimated average burden hours per response: 0.5

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 . <u>Kapadia</u>	Address of Repo Aman	orting Person <sup>*</sup>	2. Date of E Requiring S (Month/Day 08/13/202	Statement //Year)	3. Issuer Name <b>and</b> Ticker or Trading Symbol <u>Lionheart Acquisition Corp. II</u> [ LCAPU ]				
(Last) 4218 NE 21 (Street) MIAMI (City)	(First) ND AVENUE FL (State)	(Middle) 33137 (Zip)			4. Relationship of Reportin Issuer (Check all applicable) X Director Officer (give title below)	k all applicable) Director 10% Owner Officer (give Other (specify		<ul> <li>5. If Amendment, Date of Original Filed (Month/Day/Year)</li> <li>6. Individual or Joint/Group Filing (Check Applicable Line)</li> <li>X Form filed by One Reporting Person Form filed by More than One Reporting Person</li> </ul>	
Table I - Non-Derivative Securities Beneficially Owned									
1. Title of Security (Instr. 4)				I	2. Amount of Securities Beneficially Owned (Instr. 4)			4. Nature of Indirect Beneficial Ownership (Instr. 5)	
Table II - Derivative Securities Beneficially Owned           (e.g., puts, calls, warrants, options, convertible securities)									
			2. Date Exercisable and Expiration Date (Month/Day/Year)		3. Title and Amount of Securities Underlying Derivative Security (Instr. 4)		4. Conversio or Exercis	se Form:	6. Nature of Indirect Beneficial Ownership (Instr.
			Date Exercisable	Expiration Date	Title	Amount or Number of Shares	Price of Derivative Security	Direct (D) or Indirect (I) (Instr. 5)	5)

**Explanation of Responses:** 

No securities are beneficially owned.

## /s<u>/ Aman Kapadia</u>

Date

08/13/2020

\*\* Signature of Reporting Person

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.