FORM 3

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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

- 1								
	OMB APPROVAL							
	OMB Number:	3235-0104						
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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

GEORGE WALTER N. Re			Date of Event equiring Staten Month/Day/Year 1/06/2014	nent	3. Issuer Name <b>and</b> Ticker or Trading Symbol Freshpet, Inc. [ FRPT ]						
(Last) (First) (Middle) C/O FRESHPET, INC.					Relationship of Reporting Person(s) to Issuer (Check all applicable)     X Director 10% Owner			5. If Amendment, Date of Original Filed (Month/Day/Year)			
400 PLAZA DRIVE, FLOOR 1						Officer (give title below)	Other (spe	cify	6. Individual or Joint/Group Filing (Check Applicable Line)		
(Street) SECAUCUS,	NJ	07094							X		y One Reporting Person y More than One erson
(City)	(State)	(Zip)									
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)		ct (D)   (	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 Secur Underlying Derivative Securi			4. Convers	cise	5. Ownership Form:	6. Nature of Indirect Beneficial Ownership (Instr. 5)
			Date Exercisable	Expiratio Date	n Title	e	Amount or Number of Shares	Price of Derivative Security		Direct (D) or Indirect (I) (Instr. 5)	

**Explanation of Responses:** 

## Remarks:

No securities are beneficially owned.

/s/ Richard Kassar, as Attorney-in-fact for the

11/06/2014

Reporting Person

\*\* 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.