

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

1. Name and Address of Reporting Person* <u>Skorpios Trust</u> <hr/> (Last) (First) (Middle) 195 ARCH. MAKARIOS III AVE. NEOCLEOUS HOUSE <hr/> (Street) LIMASSOL G4 3030 <hr/> (City) (State) (Zip)	2. Date of Event Requiring Statement (Month/Day/Year) 06/21/2021	3. Issuer Name and Ticker or Trading Symbol <u>Stoke Therapeutics, Inc. [STOK]</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)
Common Stock	14,443,681	I	See Footnote ⁽¹⁾

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	Title	Amount or Number of Shares			

1. Name and Address of Reporting Person*
Skorpios Trust

 (Last) (First) (Middle)
 195 ARCH. MAKARIOS III AVE.
 NEOCLEOUS HOUSE

 (Street)
 LIMASSOL G4 3030

 (City) (State) (Zip)

1. Name and Address of Reporting Person*
Blue Horizon Enterprise Ltd

 (Last) (First) (Middle)
 195 ARCH. MAKARIOS III AVE.
 NEOCLEOUS HOUSE

 (Street)
 LIMASSOL G4 3030

 (City) (State) (Zip)

1. Name and Address of Reporting Person*

Ezbon International Ltd

(Last) (First) (Middle)

195 ARCH. MAKARIOS III AVE.
NEOCLEOUS HOUSE

(Street)

LIMASSOL G4 3030

(City) (State) (Zip)

1. Name and Address of Reporting Person*

Montrago Trustees Ltd

(Last) (First) (Middle)

195 ARCH. MAKARIOS III AVE.
NEOCLEOUS HOUSE

(Street)

LIMASSOL G4 3030

(City) (State) (Zip)

Explanation of Responses:

1. Blue Horizon Enterprise Ltd. ("Blue Horizon") is the direct owner of 2,346,298 shares of the issuer's common stock and Ezbon International Limited ("Ezbon") is the direct owner of 2,561,531 shares of the issuer's common stock. Skorprios Trust ("Skorprios") is the sole owner of each of Blue Horizon and Ezbon. Montrago Trustees Limited ("Montrago Trustees") is the corporate trustee of Skorprios Trust. Each of Blue Horizon and Ezbon disclaim beneficial ownership of the shares of the issuer's common stock held by the other, and each of Skorprios Trust and Montrago Trustees disclaim beneficial ownership of the issuer's securities except to the extent of their pecuniary interest therein.

Remarks:

<u>/s/ Androulla</u> <u>Papadopoulou, Authorized</u> <u>Signatory on behalf of</u> <u>Skorprios Trust</u>	<u>06/30/2021</u>
<u>/s/ Anna Maria Pavlou,</u> <u>Authorized Signatory on</u> <u>behalf of Blue Horizon</u> <u>Enterprise Ltd.</u>	<u>06/30/2021</u>
<u>/s/ Anna Maria Pavlou,</u> <u>Authorized Signatory on</u> <u>behalf of Ezbon</u> <u>International Limited</u>	<u>06/30/2021</u>
<u>/s/ Androulla</u> <u>Papadopoulou, Authorized</u> <u>Signatory on behalf of</u> <u>Montrago Trustees</u> <u>Limited</u>	<u>06/30/2021</u>
** 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.