### FORM 4

### UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C.	20549
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STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPRO	DVAL						
OMB Number:	3235-0287						
Estimated average burden							
hours per response:	0.5						

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

Name and Address of Reporting Person*     ARIAS EDUARDO				suer Name <b>and</b> Tick DEX CORP [		_	Symbol		ationship of Reportir k all applicable) Director	10% (	Owner	
(Last) 1212 TERRA B	(First) BELLA AVENUE		ate of Earliest Transa	action (N	Month/	Day/Year)		X	Officer (give title below)  Sr. VP, Co	below Flobal Sales	(specify	
(Street) MOUNTAIN VIEW (City)	CA (State)	94043 (Zip)	4. If	Amendment, Date o	f Origina	al Filed	i (Month/Day,	6. Indi Line) X	vidual or Joint/Group Filing (Check Applicable  Form filed by One Reporting Person  Form filed by More than One Reporting  Person			
	Т	able I - No	n-Derivative	Securities Acc	uired	, Dis	posed of,	or Bei	neficially	Owned		
1. Title of Security (Instr. 3)		2. Transaction Date (Month/Day/Year	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transaction Code (Instr. 8)		4. Securities Disposed Of			5. Amount of Securities Beneficially Owned Following Reported	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
					Code	v	Amount	(A) or (D)	Price	Transaction(s) (Instr. 3 and 4)		(11301. 4)
Common Stock			06/11/2013		M		400	A	\$3.53	5,900	D	
Common Stock			06/11/2013		S <sup>(1)</sup>		400	D	\$5.6273	5,500	D	
Comon Stock			06/11/2013		M		300	A	\$4.74	12,900	D	
Common Stock			06/11/2013		S <sup>(1)</sup>		300	D	\$5.6064	12,600	D	
Common Stock			06/11/2013		M		300	A	\$5.08	9,800	D	
Common stock			06/11/2013		<b>S</b> <sup>(1)</sup>		300	D	\$5.6064	9,500	D	

## Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transa Code ( 8)				Expiration Date (Month/Day/Year)		7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
				Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares				
Stock Option Right to Buy <sup>(2)</sup>	\$3.53	06/11/2013		M			400	03/13/2008 <sup>(3)</sup>	02/13/2015	Common Stock	400	\$0	5,500	D	
Stock Option Right to Buy <sup>(2)</sup>	\$4.74	06/11/2013		M			300	10/23/2003 <sup>(3)</sup>	09/23/2013	Common Stock	300	\$0	12,600	D	
Stock Option Right to Buy <sup>(2)</sup>	\$5.08	06/11/2013		M			300	04/30/2005 <sup>(3)</sup>	03/31/2015	Common Stock	300	\$0	9,500	D	

### **Explanation of Responses:**

- $1.\ The\ sale\ reported\ in\ this\ Form\ 4\ was\ pursuant\ to\ the\ Reporting\ Person's\ Rule\ 10b5-1\ Selling\ Plan\ that\ was\ effective\ March\ 7,\ 2013.$
- 2. This option was granted pursuant to IRIDEX Corporation's incentive 1998 Stock Plan and is exempt pursuant to Rule 16b-3.
- 3. The shares are subject to vesting according to the following schedule: 1/48th of the total number of shares vest each month.

# Remarks:

/s/ Susan Bruce, Attorney in Fact for Eduardo Arias

06/13/2013

\*\* 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 4 (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.