FORM 3

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

1							
	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 <u>Capper Joseph</u>		son*	2. Date of Event Requirir Statement (Month/Day/Yo 01/27/2023		3. Issuer Name and Ticker or Trading Symb MIMEDX GROUP, INC. [ME					
(Last) (First) (Middle) 1775 WEST OAK COMMONS COURT NE					Relationship of Reporting Person(s) to Issuer (Check all applicable)		10% Owner		5. If Amendment, Date o	f Original Filed (Month/Day/Year)
(Street)			_	Director X Officer (give title below) Chief Executive Of				pelow)	Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person	
MARIETTA	GA	30062	_						T Offit filed by F	word than one responding reason
(City)	(State)	(Zip)								
			Table I - N	lon-Deriv	l vative Securities Beneficially Ow	ned				
1. Title of Security (Instr. 4)		Table I - N	2	vative Securities Beneficially Ow 2. Amount of Securities Beneficially Owned (Instr. 4)	3. 0	wnership Fo		Nature of Indirect Ben	eficial Ownership (Instr. 5)
1. Title of Security (Instr. 4)		Table II	- Deriva	2. Amount of Securities Beneficially	3. Or Dire (Inst	wnership Fo ct (D) or Indi tr. 5)		Nature of Indirect Ben	eficial Ownership (Instr. 5)
Title of Security (Title of Derivative	,	1)	Table II	- Derival calls, wa	2. Amount of Securities Beneficially Owned (Instr. 4) tive Securities Beneficially Owne	3. Or Dire (Inst	wnership Fo ct (D) or Indi tr. 5)		5. Ownership n Form: Direct (D)	eficial Ownership (Instr. 5) 6. Nature of Indirect Beneficial Ownership (Instr. 5)

Explanation of Responses:

Remarks:

No securities are beneficially owned.

/s/ William F. Hulse, as attorney-in-fact 01/31/2023

for Joseph Capper ** 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.

POWER OF ATTORNEY
Know all by these presents, that the undersigned hereby constitutes and appoints the Secretary and any Assistant Secretary, or any of them sign This Power of Attorney shall remain in full force and effect until the undersigned is no longer required to file Forms 3, 4, and 5 with regard Dated: January 30, 2023. /s/ Joseph H. Capper

Sworn and subscribed before me this 30th day of January, 2023.

/s/ Claudia Hinkley Bell Notary Public