FORM 3

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

Name and Address of Reporting F Mihalitsis Kyriakos	F	2. Date of Event Requiring Statement (Month/Day/Year) 02/27/2019 3. Issuer Name and Ticker or Trading Symbol DiamondPeak Holdings Corp. [DPHCU]									
(Last) (First) (Middle) 40 W 57TH STREET, 29TH FLOOR		02/2//2013		Relationship of Reporting Perso (Check all applicable) Director	on(s) to Issue 10% Owne	(M	5. If Amendment, Date of Original Filed (Month/Day/Year)				
(Street) NEW YORK NY	10019	-		X Officer (give title below) CFO and Secre	Other (specify below)		Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person				
(City) (State)	(Zip)										
Table I - Non-Derivative Securities Beneficially Owned											
1. Title of Security (Instr. 4)				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)											
1. Title of Derivative Security (Instr. 4)		2. Date Exercisable and Expiration Date (Month/Day/Year)		3. Title and Amount of Securi Underlying Derivative Securi		4. Conversio or Exercis	Form:	6. Nature of Indirect Beneficial Ownership (Instr. 5)			
		Date Exercisable	Expiratior Date	n Title	Amount or Number of Shares	Price of Derivative Security	Direct (D) or Indirect (I) (Instr. 5)				

Explanation of Responses:

Remarks:

The reporting person doesn't own any securities of the issuer.

No securities are beneficially owned.

/s/ Kyriakos Mihalitsis 02/27/2019

** Signature of Reporting Person Dat

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

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.

 $^{^{\}star}$ 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).