FORM 3

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL 3235-0104 OMB Number: Estimated average burden hours per response: 0.5

INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF **SECURITIES**

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934

			or Secti	on 30(h)	of th	ne Investment Company Act	t of	1940					
1. Name and Address of Reporting Person* Fund 1 Investments, LLC			2. Date of Event Requiring Statement (Month/Day/Year) 10/31/2023			3. Issuer Name and Ticker or Trading Symbol TILE SHOP HOLDINGS, INC.					[TTSH]		
(Last) (First) (Middle) 100 CARR 115					4. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director X 10% Owner				5. If Amendment, Date of Original Filed (Month/Day/Year)				
UNIT 1900 (Street)			-			Director Officer (give title below)	X		(specify		6. Individual or Joint/Group Filing (Check Applicable Line) Form filed by One Reporting Person		
	R 00	677	_							X Form filed by More than One Reporting Person			
(City) (S	State) (Zi _l	p)											
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)			Direct ndirect	4. Nature of Indirect Beneficial Ownership (Instr. 5)				
Common Stock	ζ					4,614,318				See	Footnotes ⁽¹⁾		
Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)													
1. Title of Derivative Security (Instr. 4) 2. Date Exercing Expiration Date (Month/Day/Y					3. Title and Amount of S Underlying Derivative So (Instr. 4)				rcise	5. Ownership Form: Direct (D)	Ownership (Instr.		
			Date Exercisable	Expirat Date	ion	Title	OI N Of	lumber	Deriva Securi	tive	or Indirect (I) (Instr. 5)	5)	
1. Name and Add	ress of Reporting												
Fund 1 Investments, LLC													
(Last) 100 CARR 11 UNIT 1900	(First)	(Mid	ddle)										
(Street) RINCON PR 006		677											
(City) (State) (Zip		0)											
1. Name and Address of Reporting Person* Pleasant Lake Partners LLC													
(Last) (First) (Mic 100 CARR 115 UNIT 1900		ddle)											
(Street) RINCON	PR	006	677										

Explanation of Responses:

(State)

(Zip)

(City)

/s/ Fund 1 Investments, LLC by: Benjamin C. Cable, Chief Operating

Officer

/s/ Pleasant Lake Partners

LLC by: Fund 1

Investments, LLC, its

<u>Managing Member, by</u> <u>Benjamin C. Cable, Chief</u>

Operating Officer

** Signature of Reporting Person

11/06/2023

11/06/2023

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.