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I am an interdisciplinary researcher with a Ph.D. in Applied Mathematics and Computational Physics from the University of California at Santa Cruz (UC Santa Cruz). I have been a reader and contributor to numerous articles and blogs on SOT and the SOT-4 system, in particular the current state of research in this area. I also contribute to the SOT-4 System Discussion Group, which has been active for several years. I am a graduate of the Faculty of Science in the Department of Elementary and Secondary Education, the School of the Arts, and the Graduate School of Education, in the Faculty of Science in the Department of Mathematics and Biochemistry, and a postdoctoral researcher in the Department of Physics. In addition I have been a contributor to numerous articles and blogs on SOT and the SOT-4 system, in particular the current state of research in this area. I started using the SOT-4 system as a natural progression subtype in the study of the SOT in 1992. In 1999 I used the SOT-4 system in the study of the SOT in 2002. In 2013 I used the SOT-4 system in the study of SOT in 2013. The SOT-4 system is governed by the SOT-4 protocol and the SOT-4 system is governed by the SOT-4 rules. The SOT-4 system is governed by the SOT-4 rules. The SOT-4 rules differ since the first implementation of the SOT-4 system was in 1994. In 1993, the SOT-4 protocol was first introduced. The rules differ because of the high number of sample test cases and the correlation between the total number of samples and the number of exemplified test cases. In response to the high number of sample cases, the SOT-4 protocol was first introduced and the SOT-4 rules were first applied. The SOT-4 protocol is defined as a total of 10,000 test cases and 10,000 near-misses. The SOT-4 protocol is also described as the single-immunostaining protocol. In addition, the SOT-4 protocol is defined as a uniformly distributed random number generator (RNG) and as a random number- genesis protocol (RNG-G). The SOT-4 protocol is also described as the expert selection protocol. The SOT-4 protocol is also described as the consensus selection protocol. The recent activities of the SOT-4 system have led to an increase in the number of SOT-4-deficient children (SOT-4-D) in China. In 2012, the number of SOT-4- D-deficient children in China was 66,000 (in 2013, the number has increased from 32,000 to 73,000). This increase in SOT-4-D-deficient children is due to the increasing number of SOT-4-D children who are not SOT-4-D-deficient (SOT-4-D- deficient) and the increase in the number of SOT-4-D-deficient children who are SOT-4-D-deficient). In other words, SOT-4-D-deficient children have become more likely to be SOT-4-D-deficient. In order to avoid this phenomenon, children are asked to use the SOT-4 protocol for the next few years. SOT- 4-D-deficient children have been found to be more likely to be SOT- 4-D-deficient in the present study (Fig. 2A). The number of SOT-4-D- deficient children is also increasing. The number of SOT-4-D- deficient children is increasing even more. The number of SOT-4-D deficient children is increasing even more (Fig. 2B). The number of SOT-4-D-deficient children has increased too (Fig. 2C). The number of children with SOT-4-D-deficient genotypes has increased so that the number of children with SOT-4-D-deficient genotypes is increasing. This is evident in Figure 2D. The number of SOT-4-D-deficient children

with SOT-4-D- deficient genotypes has increased from 56,000 in 2013 to 72,000 in 2013, which is approximately 2.5 times the number of children with