

COMMODITY FUTURES TRADING COMMISSION

FORM SEF

SWAP EXECUTION FACILITY
APPLICATION OR AMENDMENT TO APPLICATION FOR REGISTRATION

COVER SHEET

Clear Markets North America, Inc.

Exact name of Applicant as specified in charter

831 East Morehead Street, Suite 150, Charlotte, North Carolina 28202

Address of principal executive offices

If this is an **APPLICATION** for registration, complete in full and check here.

If this is an **AMENDMENT** to an application, or to an existing order of registration, list all items that are amended and check here.

GENERAL INFORMATION

1. Name under which the business of the swap execution facility is or will be conducted, if different than name specified above (include acronyms, if any):

_____ N/A _____

2. If name of swap execution facility is being amended, state previous swap execution facility name:

_____ N/A _____

3. Contact information, including mailing address if different than address specified above:

_____ Number and Street _____

_____ City State Country Zip Code _____

704-997-3779 Main Phone 704-255-1656 Number Fax

http://www.clear-markets.com Website URL info@clear-markets.com E-mail Address

4. List of principal office(s) and address(es) where swap execution facility activities are/will be conducted:
Office Address

831 East Morehead Street, Suite 180, Charlotte, North Carolina 28202

470 Park Avenue South, 8th Floor, New York, NY 10016

5. If the Applicant is a successor to a previously registered swap execution facility, please complete the following:
a. Date of succession

b. Full name and address of predecessor registrant

Name

Number and Street

City State Country Zip Code

Main Phone Number Website URL

BUSINESS ORGANIZATION

6. Applicant is a:

- Corporation
- Partnership
- Limited Liability Company
- Other form of organization (specify) _____

7. Date of incorporation or formation: September 27, 1999

8. State of incorporation or jurisdiction of organization: Delaware

9. The Applicant agrees and consents that the notice of any proceeding before the Commission in connection with this application may be given by sending such notice by certified mail to the person named below at the address given.

Shawn A Dorsch, President & CEO
Print Name and Title

Clear Markets North America, Inc.
Name of Applicant

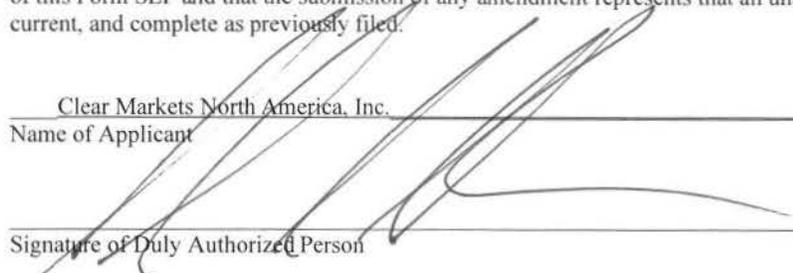
831 East Morehead Street, Suite 150
Number and Street

Charlotte, North Carolina 28202
City State Zip Code

SIGNATURES

10. The Applicant has duly caused this application or amendment to be signed on its behalf by the undersigned, hereunto duly authorized, this seventeenth day of December, 2013. The Applicant and the undersigned represent hereby that all information contained herein is true, current, and complete. It is understood that all required items and Exhibits are considered integral parts of this Form SEF and that the submission of any amendment represents that all unamended items and Exhibits remain true, current, and complete as previously filed.

Clear Markets North America, Inc.
Name of Applicant


Signature of Duly Authorized Person

Shawn A Dorsch, President & CEO
Print Name and Title of Signatory