

**COMMODITY FUTURES TRADING COMISSION**

**FORM DCM**

**CONTRACT MARKET  
APPLICATION OR AMENDMENT TO APPLICATION FOR DESIGNATION**

**COVER SHEET**

**IMX HEALTH, LLC**

---

Exact name of Applicant as specified in charter

141 W. Jackson, Suite 300A, Chicago, Illinois 60604

---

Address of principal executive offices

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

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

<hr/>	<hr/>
<hr/>	<hr/>
<hr/>	<hr/>
<hr/>	<hr/>

**GENERAL INFORMATION**

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

IMX HEALTH, LLC ("IMX"); Intelligent Medicine Exchange

2. If name of designated contract market is being amended, state previous designated contract market name:

---