

COMMODITY FUTURES TRADING COMMISSION

FORM SEF

SWAP EXECUTION FACILITY  
APPLICATION OR AMENDMENT TO APPLICATION FOR REGISTRATION

COVER SHEET

SDX Trading, LLC

Exact name of Applicant as specified in charter

545, Madison Avenue, 17th Floor, New York City, NY 10022

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.

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**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):

SDX Trading, LLC

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

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

as above

Number and Street

City	State	Country	Zip Code
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212.317.7178

Main Phone Number

212.317.7199

Fax

www.sdxtrading.com

Website URL

enquiries@sdxtrading.com

E-mail Address

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

<u>Office</u>	<u>Address</u>
<u>New York</u>	<u>545 Madison Avenue, 17th Floor, New York, NY</u>
_____	_____
_____	_____

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 12, 2013

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.

David Gertler, Chief Compliance Officer  
Print Name and Title

SDX Trading, LLC  
Name of Applicant

545 Madison Avenue, 17th Floor  
Number and Street

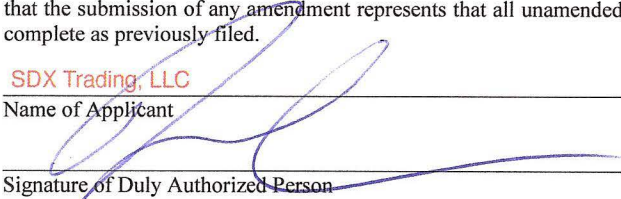
New York NY 10022  
City State Zip Code

**SIGNATURES**

10. The Applicant has duly caused this application or amendment to be signed on its behalf by the undersigned, hereunto duly authorized, this 1st day of October, 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.

SDX Trading, LLC

Name of Applicant

  
Signature of Duly Authorized Person

David Collins, Chief Executive Officer

Print Name and Title of Signatory