

COMMODITY FUTURES TRADING COMMISSION

FORM SEF

SWAP EXECUTION FACILITY
APPLICATION OR AMENDMENT TO APPLICATION FOR REGISTRATION

COVER SHEET

INFX SEF, Inc.

Exact name of Applicant as specified in charter

3400 Hillview Ave, Bldg 4, Palo Alto, CA 94304

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):

Same as Above

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

NA

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

Same as Above

Number and Street

City

State

Country

Zip Code

(650) - 424 - 4529

Main Phone Number

(650) 494 - 1674

Fax

www.INFXSEF.com

Website URL

Stephanie.Feldt@INFXSEF.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>CA</u>	<u>3400 Hillview Ave, Bldg 4</u>
<u></u>	<u>Palo Alto, CA 94304</u>
<u></u>	<u></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: 12/19/2011

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.

Stephanie Feldt, Chief Compliance Officer
Print Name and Title

INFX SEF, Inc.
Name of Applicant

3400 Hillview Ave, Bldg #4
Number and Street

Palo Alto CA 94304
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 30 day of July, 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.

INFX SEF, Inc.
Name of Applicant



Signature of Duly Authorized Person

Vikas Srivastava, CEO
Print Name and Title of Signatory