

Exhibit 3

<b>NASDAQ OMX PHLX LLC</b> <b>Branch Office Disclosure Form</b>	
<b>Please indicate the purpose of this filing:</b> <input type="checkbox"/> <b>Initial</b> <span style="margin-left: 200px;"><input type="checkbox"/> <b>Amendment</b></span> <span style="margin-left: 100px;"> <input type="radio"/> <b>Addition of branch office(s)</b>  <input type="radio"/> <b>Deletion of branch office(s)</b> </span>	
<b>Section A. General Information</b>	
Firm name:	CRD No.: _____ BD No.: _____
Principal place of business:	
<input type="checkbox"/> Member organization <b>does not</b> operate branch offices <i>Please return signed form to NASDAQ OMX Membership.</i>	
<input type="checkbox"/> Member organization <b>does</b> operate branch offices <i>Please complete a Section B for <u>each</u> branch office location.</i>	
<b>Section B. Branch Office Disclosure Information</b>	
<i>If the member organization has branch office locations, the following information must be provided for each location.</i>	
Branch office location:	
Telephone number:	Facsimile number:
Name and of individual responsible for supervision of branch office:	Individual CRD No.
Supervisor email address:	
Date branch office was established:	Number of traders at location:
Is this location a private residence?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Type of activity (provide a brief description of the type of activity that takes place at this branch office.)	
<b>Section B. Branch Office Disclosure Information</b>	
<i>If the member organization has branch office locations, the following information must be provided for each location.</i>	
Branch office location:	
Telephone number:	Facsimile number:
Name and of individual responsible for supervision of branch office:	Individual CRD No.
Email address:	
Date branch office was established:	Number of employees at location:
Is this location a private residence?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Type of activity (provide a brief description of the type of activity that takes place at this branch office.)	

**Section C. Signature**

This Form is being submitted pursuant to Phlx Rule 748(f). The information provided is true and correct as of the date of submission of this form to the Exchange. The undersigned has completed this form in compliance with Rule 748(f). Any amendments must be submitted to the Exchange no later than thirty (30) days from the date of any change to information provided herein.

\_\_\_\_\_  
Officer Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Telephone number

\_\_\_\_\_  
Email address

**Section D. Submission**

Please submit your completed form to:

NASDAQ OMX Membership  
1900 Market Street, 2<sup>nd</sup> Floor  
Philadelphia, PA, 19103  
[membership@nasdaqomx.com](mailto:membership@nasdaqomx.com).

Questions may be directed to NASDAQ OMX Membership at 215-496-5322.