

**Interim Designation of Agent to Receive Notification
of Claimed Infringement**

Full Legal Name of Service Provider: Axixe LLC

Alternative Name(s) of Service Provider (including all names under which the service provider is doing business): _____

Address of Service Provider: 12330 Perry Highway Suite 205, Wexford, PA 15090

Name of Agent Designated to Receive Notification of Claimed Infringement: Thomas Light

Full Address of Designated Agent to which Notification Should be Sent (a P.O. Box or similar designation is not acceptable except where it is the only address that can be used in the geographic location):
Axixe attn: Thomas Light, 12330 Perry Highway Suite 205,
Wexford, PA 15090

Telephone Number of Designated Agent: 855-462-9493

Facsimile Number of Designated Agent: 855-462-9493

Email Address of Designated Agent: tom.light@axixe.com

_____ Representative of the Designating Service Provider:
_____ Date: 1P-29-13

Typed or Printed Name and Title: Thomas Light, Vice President Product Development

**Note: This Interim Designation Must be Accompanied by a Filing Fee*
Made Payable to the Register of Copyrights.**
***Note: Current and adjusted fees are available on the Copyright website at
www.copyright.gov/docs/fees.html**

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FEB 21 2014**

Mail the form to:
**Copyright I&R/Recordation
P.O. Box 71537
Washington, DC 20024**



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