

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

Full Legal Name of Service Provider: Bob's Discount Furniture

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

Address of Service Provider: 428 Tolland Turnpike, Manchester, CT 06042

Name of Agent Designated to Receive Notification of Claimed Infringement: Christian Ambrosio

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):
428 Tolland Turnpike, Manchester, CT 06042

Telephone Number of Designated Agent: (860) 474-1403

Facsimile Number of Designated Agent: _____

Email Address of Designated Agent: christian.ambrosio@mybobs.com



Designating Service Provider:
Date: 7/17/15

Typed or Printed Name and Title: Christian Ambrosio, Director of Digital Marketing

**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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