

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

Full Legal Name of Service Provider: ChoiceMap Inc.

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

Address of Service Provider: PO. Box 20821, Seattle, WA 98102-1821

Name of Agent Designated to Receive Notification of Claimed Infringement: Rebecca Jackson, Designated Agent

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):

801 Second Avenue, Suite 1115
Seattle, Washington 98104-1509

Telephone Number of Designated Agent: 206-386-5200

Facsimile Number of Designated Agent: 206-386-7322

Email Address of Designated Agent: ChoiceMap@gmail.com

Signature of Officer or Representative of the Designating Service Provider:
 _____ **Date:** February 17, 2016

Typed or Printed Name and Title: Jonathan Jackson, Founder and CEO

**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**

**Scanned
MAR 17 2016**

**Received
FEB 25 2016
Copyright Office**

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