

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

Full Legal Name of Service Provider: Clover Letter LLC

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

Address of Service Provider: 311 Washington Ave. Apt B1 Brooklyn NY 11205

Name of Agent Designated to Receive Notification of Claimed Infringement: Liza Darwin

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):
311 Washington Ave. Apt B1
Brooklyn NY 11205

Telephone Number of Designated Agent: (615) 481-9095

Facsimile Number of Designated Agent: _____

Email Address of Designated Agent: Liza.Darwin@gmail.com

Signature of Officer or Representative of the Designating Service Provider: _____
Date: 3/22/16

Typed or Printed Name and Title: CASIMY LEWIS - Co-Founder

**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**

Mail the form to:
U.S. Copyright Office, Designated Agents
P.O. Box 71537
Washington, DC 20024-1537

SCANNED
JUN 05 2016

Received
MAY 12 2016
Copyright Office

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