

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

Full Legal Name of Service Provider: ePassing, LLC

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

Address of Service Provider: 7801 East Bush Lake Rd, Suite 380, Minneapolis, MN 55439

**Name of Agent Designated to Receive
Notification of Claimed Infringement:** Neil A. Wilson

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):
7801 East Bush Lake Rd, Suite 380, Minneapolis, MN 55439

Telephone Number of Designated Agent: 952.378.1314

Facsimile Number of Designated Agent: n/a

Email Address of Designated Agent: neil.wilson@wilsontool.com

of the Designating Service Provider:

Date: June 10 2014

Neil A. Wilson, Founder - Chairman

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



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