

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

**Full Legal Name of Service Provider:** Edenred Commuter Benefit Solutions LLC

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

Edenred USA

**Address of Service Provider:** 320 Nevada Street, Suite 401, Newton, MA 02460

**Name of Agent Designated to Receive Notification of Claimed Infringement:** Dharmesh Parikh

**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):  
320 Nevada Street, Suite 401, Newton, MA 02460

**Telephone Number of Designated Agent:** 857-228-1410

**Facsimile Number of Designated Agent:** 857-228-1414

**Email Address of Designated Agent:** copyright@commuterbenefits.com

**Representative of the Designating Service Provider:** \_\_\_\_\_  
**Date:** 12/5/2014

**Typed or Printed Name and Title:** Dharmesh Parikh, VP of Finance

**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](http://www.copyright.gov/docs/fees.html)**

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