

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

**Full Legal Name of Service Provider:** Framebridge, Inc.

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

**Address of Service Provider:** 3218 O Street NW, Suite #2, Washington, DC 20007

**Name of Agent Designated to Receive Notification of Claimed Infringement:** Copyright 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):**  
3218 O Street NW, Suite #2, Washington, DC 20007

**Telephone Number of Designated Agent:** 202-629-0727

**Facsimile Number of Designated Agent:** \_\_\_\_\_

**Email Address of Designated Agent:** support@framebridge.com

**\_\_\_\_\_ Representative of the Designating Service Provider:**  
**Date:** 8/22/17

**Typed or Printed Name and Title:** Kristyn Reed-Salow, Chief Financial Officer

**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)**

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

SCANNED  
SEP 22 2016

Received  
SEP 22 2016  
Copyright Office

SRI-3995376262

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