

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

Full Legal Name of Service Provider: GETCLOUDER INC.

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

Address of Service Provider: 901 N. PITT ST SUITE 320, ALEXANDRIA, VA 22314

Name of Agent Designated to Receive Notification of Claimed Infringement: W. DAVID SNEAD

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):
521 14TH STREET NE, WASHINGTON, DC 20002

Telephone Number of Designated Agent: 202-558-2366

Facsimile Number of Designated Agent: 202-318-4089

Full Address of Designated Agent: david.snead@dsnead.com



Representative of the Designating Service Provider: _____
Date: September 16, 2014

Typed or Printed Name and Title: MILENA STEFANOVA, COMPANY SECRETARY

**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
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