

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

Full Legal Name of Service Provider: Glances, Inc

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

Address of Service Provider: 526 S Main St, Suite 801G. Akron, Ohio 44311

Name of Agent Designated to Receive Notification of Claimed Infringement: Jack L Hilton

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): 526 S Main St, Suite 801G. Akron, Ohio 44311

Telephone Number of Designated Agent: (330) 257-4008

Facsimile Number of Designated Agent: Not Available

Email Address of Designated Agent: dmca@glancesapp.com

_____ Representative of the Designating Service Provider:
_____ Date: 06/17/2014

Typed or Printed Name and Title: Austin Kettner, 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**

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