

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

**Full Legal Name of Service Provider:** Garden State Financial Services LLC

**Alternative Name(s) of Service Provider (including all names under which the service  
provider is doing business):** d/b/a David Elefant Wealth Management Group

**Address of Service Provider:** 300 West Main Street, Rockaway, NJ 07866


**Name of Agent Designated to Receive  
Notification of Claimed Infringement:** David Elefant

**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):  
300 West Main Street, Rockaway, NJ 07866

**Telephone Number of Designated Agent:** 973-627-6066

**Facsimile Number of Designated Agent:** 973-637-6694

**Email Address of Designated Agent:** david@davidelefant.com

**Signature of Officer or Representative of the Designating Service Provider:**  
 Date: 07/28/2012

**Typed or Printed Name and Title:** David Elefant President

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



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