

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

Full Legal Name of Service Provider: iCopyright Inc.

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

Address of Service Provider: 4742 42nd Avenue SW, Suite 615, Seattle, WA 98116

Name of Agent Designated to Receive Notification of Claimed Infringement: Andrew S. Elston

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):
4742 42nd Avenue S.W., Suite 615, Seattle, WA 98116

Telephone Number of Designated Agent: 206-484-8561

Facsimile Number of Designated Agent: 206-484-8561

Email Address of Designated Agent: andrew@icopyright.com

Designating Service Provider: _____
Date: September 22, 2011

Typed or Printed Name and Title: Andrew S. Elston, CEO

**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
Washington, DC 20024



*Seanne J
D. 9/27/11*

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Copyright Office