

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

Full Legal Name of Service Provider: Insurance Experts Network LLC

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

Address of Service Provider: 370 S 100 E, Provo, UT 84606

Name of Agent Designated to Receive Notification of Claimed Infringement: Nathan Collins

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):
370 S 100 E
Provo, UT 84606

Telephone Number of Designated Agent: (801) 854-7160

Facsimile Number of Designated Agent: (801) 436-5445

Email Address of Designated Agent: DMCA_Compliance@IENetwork.com

Signature of Officer or Representative of the Designating Service Provider:
 _____ **Date:** 10/26/2011

Typed or Printed Name and Title: Nathan Collins, President/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**



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