

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

**Full Legal Name of Service Provider:** Leaderclips, Inc.

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

**Address of Service Provider:** 70 Farm Road, Sherborn, MA 01770

**Name of Agent Designated to Receive Notification of Claimed Infringement:** Daniel Hoover

**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): 70 Farm Road, Sherborn, MA 01770

**Telephone Number of Designated Agent:** 248-808-1093

**Facsimile Number of Designated Agent:** 508-647-4917

**Email Address of Designated Agent:** dan@leaderclips.com



**Designating Service Provider:**  
**Date:** 3-26-15

**Typed or Printed Name and Title:** Daniel Hoover, Chief Operating Officer

**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)**

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