

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

Full Legal Name of Service Provider: LIGHTVIEW CAPITAL LLC

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

Address of Service Provider: 35 BEECHWOOD RD - SUITE 2B
SUMMIT, NJ 07901

Name of Agent Designated to Receive Notification of Claimed Infringement: RICHARD ERICKSON

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): _____

Telephone Number of Designated Agent: 908 751 1500 X1

Facsimile Number of Designated Agent: 908 897 0532

Email Address of Designated Agent: rerickson@lightviewcapital.com

 of the Designating Service Provider:
Date: 9-12-16

Typed or Printed Name and Title: RICHARD ERICKSON
MANAGING DIRECTOR

**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:
U.S. Copyright Office, Designated Agents
P.O. Box 71537
Washington, DC 20024-1537

SCANNED
APR 03 2017

Received
SEP 22 2016
Copyright Office