

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

Full Legal Name of Service Provider: LOOPLABS, LLC

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

Address of Service Provider: 489 5TH AVE -24A, NEW YORK, NY 10017

Name of Agent Designated to Receive Notification of Claimed Infringement: DMCA-AGENT

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): 489 5TH AVE -24A, NEW YORK, NY 10017

Telephone Number of Designated Agent: 212-765-3240

Facsimile Number of Designated Agent: 212-245-4301

Email Address of Designated Agent: DMCA-AGENT@LOOPLABS.COM



Name of the Designating Service Provider: _____
Date: 03/16/15

Typed or Printed Name and Title: CRAIG SWANN - PARTNER

**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

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MAR 25 2015
Copyright Office