

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

Full Legal Name of Service Provider: Michael Zimmerman Inc.

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

Address of Service Provider: 1177 Queen Street #2901, Honolulu, HI 96814

Name of Agent Designated to Receive Notification of Claimed Infringement: Michael Zimmerman

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):
1177 Queen Street #2901, Honolulu, HI 96814

Telephone Number of Designated Agent: 808-457-9683

Facsimile Number of Designated Agent: 808-275-3256

Email Address of Designated Agent: michael@michael-zimmerman.com



Signature of the Designating Service Provider: _____
Date: 1/27/2016

Title: Michael Zimmerman, President

**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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