

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

Full Legal Name of Service Provider: MOJIVA, LLC

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

Address of Service Provider: 19 Pine Hill Ave, NORWALK, CT 06855

Name of Agent Designated to Receive Notification of Claimed Infringement: KRISHNA ARVAPALLY

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):

19 Pine Hill Ave, Norwalk, CT 06855

Telephone Number of Designated Agent: 732-910-5888

Facsimile Number of Designated Agent: 203-286-2463

Email Address of Designated Agent: Krish@mojiva.com

Signature of Officer or Representative of the Designating Service Provider: _____

Date: 9/29/08

Typed or Printed Name and Title: KRISHNA ARVAPALLY, DIRECTOR OF TECHNOLOGY

Note: This Interim Designation Must be Accompanied by a \$80 Filing Fee Made Payable to the Register of Copyrights.

Mail the form to:

Copyright GC/I&R
P.O. Box 70400
Washington, DC 20024

SCANNED 10/16-2008



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