

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

Full Legal Name of Service Provider: MyFab5, Inc.

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

Address of Service Provider: 2621 Meade Ct, Ann Arbor, MI 48105

Name of Agent Designated to Receive Notification of Claimed Infringement: Calvin Schemanski

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):
2621 Meade Ct, Ann Arbor, MI 48105

Telephone Number of Designated Agent: 231-838-0812

Facsimile Number of Designated Agent: _____

Email Address of Designated Agent: calvin@myfab5.com

Identify the Interim Designation to be Amended, by Service Provider Name and Filing Date, so that it may be Readily Located in the Directory Maintained by the Copyright Office: MyFab5, LLC; scanned date 3-8-2013; stamped received 2-14-2013

 **Signature of the Designating Service Provider:** _____
Date: 12/10/15

Typed or Printed Name and Title: Omeid Seirafi-pour, CEO

Note: This Amended 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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JAN 21 2016

Received

DEC 28 2015

Copyright Office