

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

**Full Legal Name of Service Provider:** Registered Agent Solutions, Inc.

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

**Address of Service Provider:** 1090 Vermont Ave., N.W., Suite 910, Washington DC 20005

**Name of Agent Designated to Receive Notification of Claimed Infringement:** Corporate Secretary

**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):  
1090 Vermont Ave., N.W., Suite 910, Washington DC 20005

**Telephone Number of Designated Agent:** 888-705-7274

**Facsimile Number of Designated Agent:** 888-706-7274

**Signature of Designating Service Provider:** \_\_\_\_\_  
[Redacted Signature] **Agent:** sop@rasi.com

**Date:** 05/30/13

**Name of Designating Service Provider:** Ricardo Orozco - Secretary

**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](http://www.copyright.gov/docs/fees.html)**

**Scanned  
JUL 01 2013**

**Received  
JUN 25 2013  
Copyright Office**

