

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

Full Legal Name of Service Provider: Sharket, LLC

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

Address of Service Provider: 610 Sycamore St Suite 320, Celebration, FL 34747

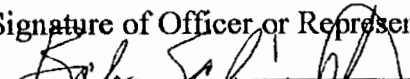
Name of Agent Designated to Receive Notification of Claimed Infringement: Bob Schmidt

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):
610 Sycamore St Suite 320, Celebration, FL 34747

Telephone Number of Designated Agent: 1-855-742-7538

Facsimile Number of Designated Agent: 1-321-413-0272

Email Address of Designated Agent: dmca@sharket.com

Signature of Officer or Representative of the Designating Service Provider:
 _____ **Date:** 2/25/2015

Typed or Printed Name and Title: Bob Schmidt
Manager

**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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Received
MAR 12 2015
Copyright Office