

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

Full Legal Name of Service Provider: Topo Athletic, LLC

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

Address of Service Provider: 55 Chapel Street, ^{Newton, MA 02458} ~~Newton, MA~~

Name of Agent Designated to Receive Notification of Claimed Infringement: Natalie Riley

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):
55 Chapel Street Newton, MA 02458

Telephone Number of Designated Agent: (617) 831-4104

Facsimile Number of Designated Agent: (617) 663-6216

Email Address of Designated Agent: natalie.riley@topoathletic.com

Signature of Representative of the Designating Service Provider: _____
Date: 6/14/13

Typed or Printed Name and Title: Natalie Riley, Director of Finance

**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:
**Copyright I&R/Recordation
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