

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

Full Legal Name of Service Provider: Vrse Inc.

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

Address of Service Provider: 1523 Cabrillo Avenue, Venice, CA 90291

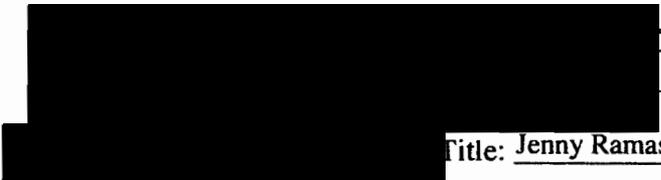
Name of Agent Designated to Receive Notification of Claimed Infringement: Jenny Ramaswamy

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):
Vrse Inc. 1523 Cabrillo Avenue, Venice, CA 90291

Telephone Number of Designated Agent: 415-846-7145

Facsimile Number of Designated Agent: _____

Email Address of Designated Agent: jenny@vrse.com



Designating Service Provider:
Date: 11/6/2015

Title: Jenny Ramaswamy

**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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DEC 16 2015**

**Received
NOV 17 2015
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