

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

Full Legal Name of Service Provider: Docs Sports, LLC

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

Address of Service Provider: 1059 Lawrence Ave, Westfield, NJ 07090

Name of Agent Designated to Receive Notification of Claimed Infringement: Ronald Johnson

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):
Docs Sports, LLC, 1059 Lawrence Ave Westfield, NJ 07090

Telephone Number of Designated Agent: 604.838.9345

Facsimile Number of Designated Agent: 314.552.7299

Email Address of Designated Agent: ronjohnson07@gmail.com

Signature of Officer or Representative of the Designating Service Provider: _____
Date: 8/20/2010

Typed or Printed Name and Title: MATTHOU J HIMICH, ATTORNEY
OF RECORD FOR SERVICE PROVIDER

**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**

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