

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

Full Legal Name of Service Provider: Ziibra, Inc.

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

Address of Service Provider: 3718 130th AVE NE, Bellevue, WA 98005

Name of Agent Designated to Receive Notification of Claimed Infringement: Omri Mor

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):
3718 130th AVE NE, Bellevue, WA 98005

Telephone Number of Designated Agent: (425) 301-9762

Facsimile Number of Designated Agent: (206) 905-0915

Email Address of Designated Agent: omri@ziibra.com

Signature of Officer or Representative of the Designating Service Provider: _____
Date: 9/10/2012

Typed or Printed Name and Title: Omri Mor, President

**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
P.O. Box 71537
Washington, DC 20024**



Scanned
OCT 26 2012

Received
OCT 15 2012

Copyright Office