

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

Full Legal Name of Service Provider: Adgobox Corp.

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

Address of Service Provider: 19460 La Serena Dr., Fort Myers, FL 33967

Name of Agent Designated to Receive Notification of Claimed Infringement: John Morano

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):
19460 La Serena Dr., Fort Myers, FL 33967

Telephone Number of Designated Agent: (239) 878-4510

Facsimile Number of Designated Agent: _____

Email Address of Designated Agent: jmorano@adgobox.com



Name of Designating Service Provider: _____

Date: 5/12/15

Title: John Morano, 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**

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