

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

Full Legal Name of Service Provider: Bright Tek LLC

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

Address of Service Provider: 102 Washington St, Duxbury, MA 02332

Name of Agent Designated to Receive Notification of Claimed Infringement: Robert Antonellis

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):
102 Washington St
DUXBURY, MA 02332

Telephone Number of Designated Agent: 781-635-3708

Facsimile Number of Designated Agent: 877-887-8744

Email Address of Designated Agent: ra.BrightTek@gmail.com

Signature of Representative of the Designating Service Provider: _____
Date: 3/7/13

Typed or Printed Name and Title: Robert Antonellis, Managing Member, CEO

**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**

**Scanned
MAR 22 2013**

Mail the form to:
**Copyright I&R/Recordation
P.O. Box 71537
Washington, DC 20024**



**Received
MAR 13 2013
Copyright Office**