

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

Full Legal Name of Service Provider: CACAO TRIP INC.

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

Address of Service Provider: 12729 Riverside drive suite 110 Sherman village CA 91607

Name of Agent Designated to Receive Notification of Claimed Infringement: Alireza Sabzi Zamoleh

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):
12729 Riverside drive suite 110 Sherman village CA 91607

Telephone Number of Designated Agent: 8185186136

Facsimile Number of Designated Agent: NON

Email Address of Designated Agent: ADMIN@CACAO TRIP.COM

Signature of Representative of the Designating Service Provider: _____
Date: 01/07/2015

Typed or Printed Name and Title: ALIREZA SABZI ZAMOLEH CEO & FOUNDER

**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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Copyright Office