

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

**Full Legal Name of Service Provider:** Enroll America

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

**Address of Service Provider:** 1001 G Street NW, 8th Floor, Washington, DC 20001

**Name of Agent Designated to Receive Notification of Claimed Infringement:** Samuel Schoenburg

**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):  
1001 G Street NW, 8th Floor, Washington, DC 20001

**Telephone Number of Designated Agent:** 202-737-6340

**Facsimile Number of Designated Agent:** 202-347-0316

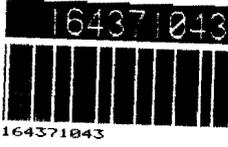
**Email Address of Designated Agent:** dmca@enrollamerica.org

**Name of Designating Service Provider:** [Redacted]  
**Date:** 1/15/2014

**Typed or Printed Name and Title:** Samuel Schoenburg, Digital Strategist

**Note: This Interim Designation Must be Accompanied by a Filing Fee\*  
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