

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

Full Legal Name of Service Provider: Exceptional Lives, Inc.

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

Address of Service Provider: 77 Heath St. Brookline, MA 02445

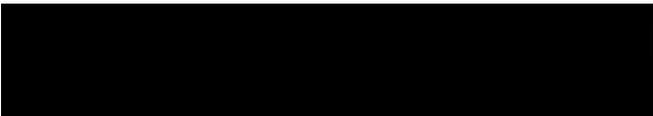
Name of Agent Designated to Receive Notification of Claimed Infringement: Anne Marcus

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): 77 Heath St. Brookline, MA 02445

Telephone Number of Designated Agent: 617-312-6829

Facsimile Number of Designated Agent: 617-277-6797

Email Address of Designated Agent: anne.panzak.marcus@gmail.com



the Designating Service Provider:
Date: 12/5/14

Typed or Printed Name and Title: Anne Marcus, Co-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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DEC 18 2014**

**Received
DEC 10 2014
Copyright Office**