

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

Full Legal Name of Service Provider: Form 10 Group, Inc

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

Address of Service Provider: 6304 Benjamin Rd, Suite 514, Tampa FL 33634

Name of Agent Designated to Receive Notification of Claimed Infringement: Michael A Banks

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):
Form 10 Group, Inc, 6304 Benjamin Rd, Suite, 514 Tampa FL 33634

Telephone Number of Designated Agent: 408-988-0110

Facsimile Number of Designated Agent: 408-351-0505

Email Address of Designated Agent: info@form10.com



of the Designating Service Provider:
Date: 7/27/2016

Typed or Printed Name and Title:
Michael A Banks, President Form 10 Group, Inc

**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

SCANNED
AUG 25 2016

Received
AUG 04 2016
Copyright Office

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