

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

**Full Legal Name of Service Provider:** GIVER, Inc

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

**Address of Service Provider:** 4746 McPherson  
St. Louis, MO 63108

**Name of Agent Designated to Receive Notification of Claimed Infringement:** CHRIS SOMMERS

**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): 4746 McPherson, St. Louis, MO 63108

**Telephone Number of Designated Agent:** 415.336.5544

**Facsimile Number of Designated Agent:** 314.985.1007

**Email Address of Designated Agent:** chris@giver.com

**Signature of Officer or Representative of the Designating Service Provider:**



Date: 8/28/12

**Typed or Printed Name and Title:** CHRIS SOMMERS, SECRETARY

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

Scanned

OCT 05 2012



Received

SEP 18 2012

Copyright Office