

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

**Full Legal Name of Service Provider:** Scott N. Godes

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

**Address of Service Provider:** 203 Tall Grass Court, Rockville, MD 20850

**Name of Agent Designated to Receive Notification of Claimed Infringement:** Scott N. Godes

**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):  
203 Tall Grass Court, Rockville, MD 20850

**Telephone Number of Designated Agent:** 301-340-1370

**Facsimile Number of Designated Agent:** 202-379-9120

**Email Address of Designated Agent:** sgodes@gmail.com

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

**Date:** 12/15/10

**Typed or Printed Name and Title:** Scott N. Godes

**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](http://www.copyright.gov/docs/fees.html)**

Mail the form to:  
Copyright RRP  
P.O. Box 71537  
Washington, DC 20024



Received

Copyright Office

Scanned  
JAN 26 2011