

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

Full Legal Name of Service Provider: Hospii Inc

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

Address of Service Provider: 1706 West Olive Ave, Fullerton, CA, 92833

Name of Agent Designated to Receive
Notification of Claimed Infringement: Chesong Lee

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):
1706 West Olive Ave, Fullerton, CA, 92833

Telephone Number of Designated Agent: (626) 774 - 6497

Facsimile Number of Designated Agent: (626) 774 - 6498

Email Address of Designated Agent: cllee@hospii.com

Signature of Officer or Representative of the Designating Service Provider:

Date: 4/5/16

Typed or Printed Name and Title: Chesong Lee, CEO

**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

MAY 11 2016

**Received
APR 07 2016
Copyright Office**

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