

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

Full Legal Name of Service Provider: imgfave, Inc.

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

Address of Service Provider: 3508 SE Washington St. Apt B, Portland Oregon 97214

Name of Agent Designated to Receive Notification of Claimed Infringement: Gabe Ragland

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):
3508 SE Washington St. Apt B, Portland Oregon 97214

Telephone Number of Designated Agent: 206 226 8319

Facsimile Number of Designated Agent: _____

Email Address of Designated Agent: gabe@imgfave.com

Signature of Officer or Representative of the Designating Service Provider:
 _____ **Date:** 07 / 12 / 2016

Typed or Printed Name and Title: Gabe Ragland, Founder and 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
AUG 03 2016**

**Received
JUL 21 2016
Copyright Office**

SR1-3853198396