

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

Full Legal Name of Service Provider: Oladas, Inc.

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

Address of Service Provider: 25 Sheephill Rd Riverside CT 06878

Name of Agent Designated to Receive Notification of Claimed Infringement: Adam Polak

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): 25 Sheephill Rd Riverside CT 06878

Telephone Number of Designated Agent: 203 536 0962

Facsimile Number of Designated Agent: 203 637 1800

Email Address of Designated Agent: adam@mylingoapp.com

Signature of Officer or Representative of the Designating Service Provider: _____ Date: 7/31/2013

Typed or Printed Name and Title: Adam Polak Co-President

**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:
Copyright I&R/Recordation
P.O. Box 71537
Washington, DC 20024



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AUG 13 2013

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AUG 07 2013
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