

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

Full Legal Name of Service Provider: Private Internet Access, Inc.

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

Address of Service Provider: 2885 Sanford Ave SW Suite 20138 Grandville, MI 49418

Name of Agent Designated to Receive Notification of Claimed Infringement: John A. Arsenault

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):

Telephone Number of Designated Agent: 303-459-7898

Facsimile Number of Designated Agent: 888-317-8582

Email Address of Designated Agent: john@londontrustmedia.com

_____ Representative of the Designating Service Provider:
_____ **Date:** _____

Typed or Printed Name and Title: _____

**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**

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