

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

Full Legal Name of Service Provider: Promoboxx, Inc.

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

Address of Service Provider: 500 Harrison Avenue, Studio 3R, Boston, MA 02118

Name of Agent Designated to Receive Notification of Claimed Infringement: Benjamin Carcio

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):
500 Harrison Avenue, Studio 3R, Boston, MA 02118

Telephone Number of Designated Agent: 800-380-7502

Facsimile Number of Designated Agent: none

Email Address of Designated Agent: legal@promoboxx.com

Signature of Officer or Representative of the Designating Service Provider: _____
Date: 7/30/2013

Typed or Printed Name and Title: Operations Manager - Gloria Magale

**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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