



1 Designation of Agent to Receive Notification of Claimed Infringement

Full Legal Name of Service Provider: RIVALHEALTH LLC

Alternative Name(s) of Service Provider (including all names under which the service provider is doing business): RIVALHEALTH, RIVAL FUSION, RIVAL SILVER, RIVAL HEROS, RIVAL U & RIVAL REHAB

Address of Service Provider: 6601 HILLSBOROUGH STREET, STE 109, RALEIGH, NC 27606

Name of Agent Designated to Receive Notification of Claimed Infringement: DAVID BENTON

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):

DAVID BENTON 6601 HILLSBOROUGH STREET, STE 109, RALEIGH, NC 27606

Telephone Number of Designated Agent: 919-803-6709

Facsimile Number of Designated Agent: 919-882-1097

Email Address of Designated Agent: DAVID.BENTON@RIVALHEALTH.COM

 Designating Service Provider: Date: 11/31/2013

Typed or Printed Name and Title: DAVID BENTON, DIRECTOR OF SOFTWARE DEVELOPMENT

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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