

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

Full Legal Name of Service Provider: _____
RS Fiber Cooperative

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

Address of Service Provider: 310 Main Street, Gaylord, MN 55334

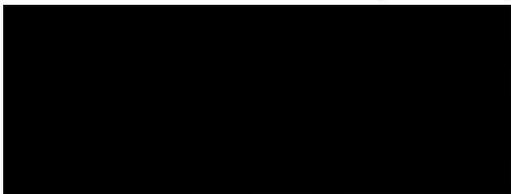
Name of Agent Designated to Receive Notification of Claimed Infringement: Natalie Matejka

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):
58 Johnson Street, Winona, MN 55987

Telephone Number of Designated Agent: 507-474-5878

Facsimile Number of Designated Agent: 507-454-5878

Email Address of Designated Agent: copyright@rsfiber.coop



Date: 8-19-2015

VP of HR and Regulatory

**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

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Copyright Office