

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

Full Legal Name of Service Provider: WAWWF, LLC

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

Address of Service Provider: 7100 S Uinta St, Centennial, CO 80112

Name of Agent Designated to Receive Notification of Claimed Infringement: Michael Pellegrin

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): 7100 S Uinta St, Centennial, CO 80112

Telephone Number of Designated Agent: 303.619.1421

Facsimile Number of Designated Agent: _____

Email Address of Designated Agent: mpellegrin@outlook.com

Signature of Officer or Representative of the Designating Service Provider: _____
Date: _____

Name and Title: Michael Pellegrin, Managing Member
12-19-2013

**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**



Scanned
JAN 31 2014

Received
JAN 15 2014
Copyright Office