

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

Full Legal Name of Service Provider: WISH LLC

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

Address of Service Provider: 307 Massachusetts Avenue NE, Washington, DC 20002

**Name of Agent Designated to Receive
Notification of Claimed Infringement:** Dan Lewis, General Manager

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):
307 Massachusetts Avenue NE, Washington, DC 20002

Telephone Number of Designated Agent: 202-548-2720

Facsimile Number of Designated Agent: 202-548-2435

Email Address of Designated Agent: interns@internsdc.com

Signature of the Designating Service Provider:

Date: 10/9/13

Typed or Printed Name and Title: Dan Lewis, General Manager

**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

IPN#
162732945

Scanned
OCT 31 2013

Received
OCT 22 2013

Copyright Office