

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

**Full Legal Name of Service Provider:** Quad Country

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

**Address of Service Provider:** 8211 S Wilding Dr, Oak Creek, WI 53154

**Name of Agent Designated to Receive Notification of Claimed Infringement:** Michael Ostrowski

**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):  
8211 S Wilding Dr, Oak Creek, WI 53154

**Telephone Number of Designated Agent:** 414-322-6730

**Facsimile Number of Designated Agent:** 414-435-0633

**Email Address of Designated Agent:** administrator@atvnation.com

**Signature** of the Designating Service Provider: \_\_\_\_\_  
Date: 2-22-08

**Typed or Printed Name and Title:** Michael Ostrowski CEO

**Note: This Interim Designation Must be Accompanied by a \$80 Filing Fee Made Payable to the Register of Copyrights.**

Mail the form to:

Copyright GC/I&R  
P.O. Box 70400  
Washington, DC 20024



**RECEIVED**

FEB 27 2008  
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