

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

Full Legal Name of Service Provider: Arvixe

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

Address of Service Provider: 928 Estes Drive, Santa Rosa, CA

Name of Agent Designated to Receive
Notification of Claimed Infringement: Arvand Sabetian

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):
928 Estes Drive, Santa Rosa, CA 95409

Telephone Number of Designated Agent: 707-527-3042

Facsimile Number of Designated Agent: 707-324-8333

Email Address of Designated Agent: arvand@arvixe.com

Signature of Officer or Representative of the Designating Service Provider:



Date: 9/1/2009

10/7/2009

AS

Typed or Printed Name and Title: Arvand Sabetian, Operations Manager

SCANNED 10 23-2009

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

