

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

Full Legal Name of Service Provider: Inveni, LLC

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

Address of Service Provider: 13911 Ridgedale Drive Suite 243 Minnetonka, MN 55305

Name of Agent Designated to Receive Notification of Claimed Infringement: Aaron Weber

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):
13911 Ridgedale Drive, Suite 243 Minnetonka, MN 55305

Telephone Number of Designated Agent: 952-405-6208

Facsimile Number of Designated Agent: 952-681-2068

Email Address of Designated Agent: privacy@inveni.com

Signature of Representative of the Designating Service Provider: _____
Date: 8-14-11

Typed or Printed Name and Title: Aaron Weber, President

**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**



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