

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

Full Legal Name of Service Provider: Illinois Carry.com

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

Address of Service Provider: 1111 W North 4th Street, Shelbyville, IL 62565

Name of Agent Designated to Receive Notification of Claimed Infringement: Tim W. Bowyer

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):
1111 W North 4th Street, Shelbyville, IL 62565

Telephone Number of Designated Agent: 217-825-4940

Facsimile Number of Designated Agent: 217-774-2824

Email Address of Designated Agent: bowyert@consolidated.net

Signature _____ **Representative of the Designating Service Provider:**
Date: 3/11/11

Typed or Printed Name and Title: Tim W. Bowyer, 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 RRP
P.O. Box 71537
Washington, DC 20024



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