

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

Full Legal Name of Service Provider: APARTMENT THERAPY LLC

Alternative Name(s) of Service Provider (including all names under which the service provider is doing business): APARTMENT THERAY THE KITCHN  
OHDEEDOH, RE-NEST, UNPLGGD

Address of Service Provider: 270 LAFAYETTE STREET, SUITE 1204, NEW YORK,  
NY 10012

Name of Agent Designated to Receive Notification of Claimed Infringement: Maxwell Gillingham-Ryan

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): 270 Lafayette St. 1204 NYC 10012

Telephone Number of Designated Agent: 212.966.7174

Facsimile Number of Designated Agent: 801.996.7174

Email Address of Designated Agent: maxwell@apartmenttherapy.com

Signature of Officer or Representative of the Designating Service Provider: [Redacted Signature] Date: 10.29.10

Typed or Printed Name and Title: MAXWELL J. GILLINGHAM-RYAN  
CEO

**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](http://www.copyright.gov/docs/fees.html)**

Mail the form to:  
Copyright RRP  
P.O. Box 71537  
Washington, DC 20024



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NOV 18 2010