Interim Designation of Agent to Receive Notification of Claimed Infringement

Full Legal Name of Service Provider: Atria Senior Living, Inc.

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

Address of Service Provider: 401 South Fourth Street, Suite 1900, Louisville, KY 40202

Name of Agent Designated to Receive Notification of Claimed Infringement: Lisa A. Conrad

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):

401 South Fourth Street, Suite 1900, Louisville, KY 40202

Telephone Number of Designated Agent: (502) 779-4700

Facsimile Number of Designated Agent: (502) 779-7682

Email Address of Designated Agent: copyright@atriaseniorliving.com

Typed or Printed Name and Title: Lisa A. Conrad, Senior Corporate Counsel

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

Mail the form to:
Copyright I&R/Recordation
P.O. Box 71537
Washington, DC 20024

Received
FEB 25 2013
Copyright Office