

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

**Full Legal Name of Service Provider:** Bellaplex, LLC

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

**Address of Service Provider:** 100 Town Square Place, Floor 6, Jersey City, NJ 07310

**Name of Agent Designated to Receive Notification of Claimed Infringement:** Erica Katz

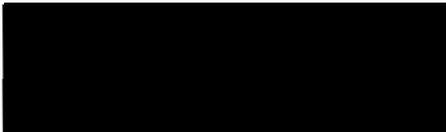
**Full Address of Designated Agent to which Notification Should be Sent** (a P.O. Box or similar designation is not acceptable except where it is the only address that can be used in the geographic location):  
100 Town Square Place, Floor 6, Jersey City, NJ 07310

**Telephone Number of Designated Agent:** 201-942-2736

**Facsimile Number of Designated Agent:** 201-221-8568

**Email Address of Designated Agent:** ekatz@atlanticcoastmedia.com

Identify the Interim Designation to be Amended, by Service Provider Name and Filing Date, so that it may be Readily Located in the Directory Maintained by the Copyright Office: Urban Nutrition, LLC 6/14/12



**Representative of the Designating Service Provider:** \_\_\_\_\_  
**Date:** 11/20/15

**Typed or Printed Name and Title:** Erica Katz - General Counsel

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

**FEB 09 2015**

\*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:  
**U.S. Copyright Office, Designated Agents**  
**P.O. Box 71537**  
**Washington, DC 20024-1537**

**Received**  
**JAN 28 2015**  
**Copyright Office**