

Interim Designation of Agent to Receive Notification of Claimed Infringement

Full Legal Name of Service Provider: Care2.com, Inc.

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

Address of Service Provider: 275 Shoreline Drive, Suite 300, Redwood City, CA 94065

Name of Agent Designated to Receive Notification of Claimed Infringement: Care2 Copyright Agent

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):
275 Shoreline Drive, Suite 300, Redwood City, CA 94065

Telephone Number of Designated Agent: 650-622-0860

Facsimile Number of Designated Agent: 650-622-0870

Email Address of Designated Agent: copyrightagent@care2team.com

Signature of Officer or Representative of the Designating Service Provider: _____
Date: February 1, 2011

Typed or Printed Name and Title: Marlin Miller, Chief Operating Officer

**Note: This Interim Designation Must be Accompanied by a Filing Fee*
Made Payable to the Register of Copyrights. #105**

***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



Received
FEB 22 2011
Copyright Office

Scanned
MAR 09 2011