Interim Designation of Agent to Receive Notification of Claimed Infringement

Alternative Name(s) of Service Provider (including all names under which the service is doing business):	
Address of S	ervice Provider: 4811 Oakton St. Suite 250 Stoke
Name of Age Notification	of Claimed Infringement: Talia Mashiach
Full Address or similar designa location):	of Designated Agent to which Notification Should be Sent (a P.O. Box ation is not acceptable except where it is the only address that can be used in the geographic 441 value of St. Suke 250
Telephone N	imber of Designated Agent: 773-764-766
Facsimile Nu	mber of Designated Agent: 847-982-9610
Email Addre	ss of Designated Agent: legal weved. com
	officer or Representative of the Designating Service Provider:
Signature of C	Date: 11-30-08

- 2009

Note: This Interim Designation Must be Accompanied by a \$80 Filing Fee Made Payable to the Register of Copyrights.

Mail the form to:

Copyright GC/I&R P.O. Box 70400 Washington, DC 20024 RECEIVED

DEC 2 4 2008 COPYRIGHT OFFICE

