

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

Full Legal Name of Service Provider: FIRST CODE LLC

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

Address of Service Provider: 744 SOUTH SYCAMORE AVE. LOS ANGELES CA 90036

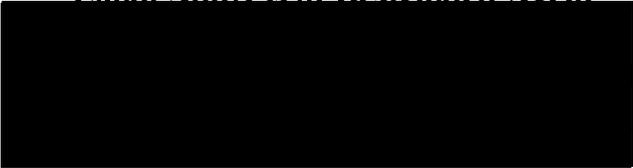
Name of Agent Designated to Receive Notification of Claimed Infringement: MICHAEL KELLEHER

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):
744 SOUTH SYCAMORE AVENUE LOS ANGELES CA 90036

Telephone Number of Designated Agent: 9173063942

Facsimile Number of Designated Agent: 3234468724

Email Address of Designated Agent: MICHAEL@FIRSTCODELLC.COM



Signature of the Designating Service Provider: _____
Date: 2/20/12

Typed or Printed Name and Title: MICHAEL KELLEHER, CHIEF EXECUTIVE OFFICER

**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**

**Scanned
MAR 30 2012**



**Received
MAR 30 2012
Copyright Office**