

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

Full Legal Name of Service Provider: Lemurian Fellowship

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

Address of Service Provider: P.O. Box 397, Ramona, CA 92065

Name of Agent Designated to Receive Notification of Claimed Infringement: Conrad M. Funk

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): Lemurian Fellowship, 17201 Highway 67, Ramona, CA 92065

Telephone Number of Designated Agent: 760-789-1420

Facsimile Number of Designated Agent: Not applicable

Email Address of Designated Agent: lemfel@lemfel.cts.com

Signature of Officer or Representative of the Designating Service Provider:
[Redacted Signature] Date: *October 10, 2012*

Typed or Printed Name and Title: Conrad M. Funk, Vice President

**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**

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



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