

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

**Full Legal Name of Service Provider:** Madewell Inc.

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

MADEWELL MUSINGS, BLOG.MADEWELL.COM

**Address of Service Provider:** 770 Broadway, New York, NY 10003

**Name of Agent designated to receive  
Notification of Claimed Infringement:** Jennifer Sheaffer

**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):  
Madewell Inc.

770 Broadway, New York, NY 10003

**Telephone Number of Designated Agent:** 212-209-8621

**Facsimile Number of Designated Agent:** 212-209-8175

**Email Address of Designated Agent:** generalcounsel@jcrew.com

 Signating Service Provider:

Date: 6/10/2015

**Typed or Printed Name and Title:** Jennifer Sheaffer, Associate General Counsel

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