

Interim Designation of Agent to Receive Notifications of Claimed Infringement

- (1) Service Provider's Full Legal Name and Address

Massachusetts Mutual Life Insurance Company
1295 State Street
Springfield, MA 01111-0001

- (2) All names under which the service provider is doing business

www.loveisagift.com

- (3) Name of the agent designated to receive notification of claimed infringement

Betsy Coddling

- (4) The full address of the agent designated to receive notification of claimed infringement

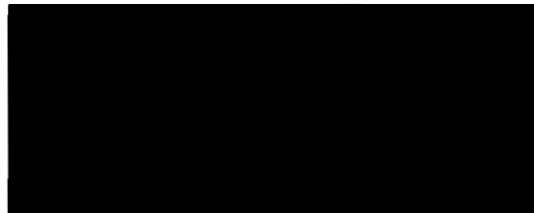
Massachusetts Mutual Life Insurance Company
1295 State Street
Springfield, MA 01111-0001

- (5) The telephone number, facsimile number, and electronic mail address of the agent designated to receive notification of claimed infringement.

Tel: 413-744-8411
Email: info@loveisagift.com

- (6) The dated signature of the appropriate officer or representative of the service provider designating the agent, accompanied by the typewritten name and title of the person signing the Notice.

September 22, 2014



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