

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

Full Legal Name of Service Provider: Meddik Incorporated

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

Address of Service Provider: 340 S Lemon Ave #9088, Walnut, CA 91789

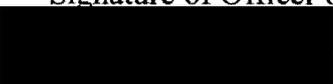
Name of Agent Designated to Receive Notification of Claimed Infringement: Benjamin Shyong

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):
340 S Lemon Ave #9088, Walnut, CA 91789

Telephone Number of Designated Agent: (917) 475-6596

Facsimile Number of Designated Agent: (917) 382-2715

Email Address of Designated Agent: DMCA@meddik.com

Signature of Officer or Representative of the Designating Service Provider:
 Digitally signed by Benjamin Shyong
DN: cn=Benjamin Shyong, o=ou,
email=ben@meddik.com, c=US
Date: 2012.05.29 00:33:27 -05'00' Date: 5/29/12

Typed or Printed Name and Title: Benjamin Shyong, Co-Founder

**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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