

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

Full Legal Name of Service Provider: Northfield Arts Town, LLC

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

Address of Service Provider: P.O. Box 440, Northfield, MN 55057

Name of Agent Designated to Receive Notification of Claimed Infringement: Amy C. Smith

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):
420 St. Olaf Ave., Northfield, MN 55057

Telephone Number of Designated Agent: 612-817-0170

Facsimile Number of Designated Agent: _____

Email Address of Designated Agent: amy@artstown.us

Designating Service Provider: _____
Date: July 17, 2013

and Title: Amy C. Smith, 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
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Washington, DC 20024



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