

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

Full Legal Name of Service Provider: Planet Cazmo, LLC

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

Address of Service Provider: 350 March Rd., Shelburne Falls, MA 01370

Name of Agent Designated to Receive
Notification of Claimed Infringement: Michael Levine

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):

350 March Rd., Shelburne Falls, MA 01370

Telephone Number of Designated Agent: 413-625-8551

Facsimile Number of Designated Agent: 413-625-8551

Email Address of Designated Agent: copyright@planetcazmo.com

Signature of Officer or Representative of the Designating Service Provider: _____

Date: 2/16/08

Typed or Printed Name and Title: Michael Levine, President

**Note: This Interim Designation Must be Accompanied by a \$80 Filing Fee
Made Payable to the Register of Copyrights.**



RECEIVED

FEB 22 2008
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