

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

Full Legal Name of Service Provider: Flying Mountain Ltd

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

Address of Service Provider: 31815 NE 162nd St., Duvall WA 98019

Name of Agent Designated to Receive Notification of Claimed Infringement: Maya Wallach

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):
31815 NE 162nd St., Duvall WA 98019

Telephone Number of Designated Agent: 206-219-9219

Facsimile Number of Designated Agent: 425-788-7361 (deliver to: PMB 124)

Email Address of Designated Agent: copyright@flyingmountain.com

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

Date: 6/8/06

Typed or Printed Name and Title: Maya Wallach, President

**Note: This Interim Designation Must be Accompanied by a \$30 Filing Fee
Made Payable to the Register of Copyrights.**

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