Interim Designation of Agent to Receive Notification of Claimed Infringement

Alternative		Provider: MAKI		es under which the service
Address of S	ervice Provider:	MAKE-UP ART (FLOOR, NEW YO	COSMETICS I	NC., 130 PRINCE STREET, 2 nd
Name of Age Notification	ent Designated to			*
acaignation is in	n acceptable except	Where it is the only ad	drace that one have	uld be Sent (a P.O. Box or similar used in the geographic location): IUE, NEW YORK, NY
10153				OLA, NEW TORK, NT
		ated Agent: (212)		
Email Addres	ss of Designated	Agent: lpuccini@	estee.com	
Signature of O	fficer or Represe	ntative of the Desi		Provider:
yped or Print	ed Name and Titl			& DEP. GEN. COUNSEL
SCAN	100001	1-2009		Residence
lote: This Int Iade Payable		n Must be Accom		O Filing Feeling 2 6 2009

