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

Alternative Name(s) of Service Provider (including all names under which the ser provider is doing business): www.affiliatedartists.com	
Address of Service Provider	r: 1297 Leaning Oak Dr Napa CA 94558
Name of Agent Designated Notification of Claimed In	to Receive fringement: AffiliatedArtists LLC
i i i i i i i i i i i i i i i i i i i	Agent to which Notification Should be Sent (a P.O. Box ble except where it is the only address that can be used in the geographic Oak Drive
Telephone Number of Desig	
Facsimile Number of Design	
	d Agent: Patricia@Affiliatedartists.com
Signature of Officer or Repre	sentative of the Designating Service Provider:  Date: 3 25 -09
yped or Printed Name and T	
ote: This Interim Designati Iade Payable to the Registe	ion Must be Accompanied by a \$80 Filing Fee r of Copyrights.
opyright GC/I&R	D 04.09-2009 RECEIV
O. Box 70400 ashington, DC 20024	
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