

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

Full Legal Name of Service Provider: Medical Mommas Media Group, LLC

Alternative Name(s) of Service Provider (including all names under which the service provider is doing business): MedicalMommas, www.medicalmommas.com

Address of Service Provider: 1100 Spring Street, Suite 760, Atlanta, Georgia, 30309

**Name of Agent Designated to Receive
Notification of Claimed Infringement:** Rhonda W. Rowland

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):
1100 Spring Street, Suite 760, Atlanta, Georgia 30309

Telephone Number of Designated Agent: 404 - 378 - 3025

Facsimile Number of Designated Agent: 404 - 888 - 0301

Email Address of Designated Agent: info@medicalmommas.com

Signature of Officer or Representative of the Designating Service Provider:
[Signature] Date: 6/1/09

Typed or Printed Name and Title:
Rhonda W. Rowland, Managing Director

SCANNED 07 08 - 20 09

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

Mail the form to:

Copyright GC/I&R
P.O. Box 70400
Washington, DC 20024



RECEIVED

JUN 11 2009

COPYRIGHT OFFICE