Interim Designation of Agent to Receive Notification of Claimed Infringement

Full Legal Name of Service Pro	ovider: Actist Tribe LLC
Alternative Name(s) of Service I provider is doing business):	Provider (including all names under which the service 4 Muse, mynuse, con, mynuse 35s. c
Address of Service Provider: 32	27 S. Topanga Blud, Topanga, CA
	ment: Vissinie Parant
Full Address of Designated Agen	et to which Notification Should be Sent (a P.O. Box ept where it is the only address that can be used in the
Telephone Number of Designated	
Facsimile Number of Designated	
Email Address of Designated Age	nt: Vparant@arkstlawgroup.com
Signature of Officed TRepresentati	ive of the Designating Service Provider: Date: 2/22/07
Typed or Printed Name and Title:	VIRGINIE PARANT,

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



FEB 27 2008
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