

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

Full Legal Name of Service Provider: SOCIALPRINTS LLC

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

Address of Service Provider: 2660 PEACHTREE RD., APT 39G, ATLANTA, GA 30305

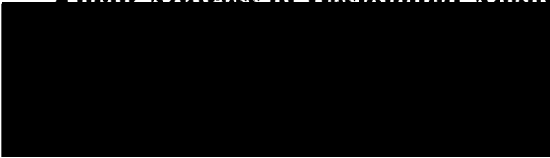
Name of Agent Designated to Receive Notification of Claimed Infringement: SEAN MCCORMICK

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):
2660 PEACHTREE RD., APT 39G, ATLANTA, GA 30305

Telephone Number of Designated Agent: (331) 684-7257

Facsimile Number of Designated Agent: (401) 250-3125

Email Address of Designated Agent: sean@socialprints.org



Name of the Designating Service Provider: _____
Date: 11/08/12

Typed or Printed Name and Title: SEAN MCCORMICK, CO-FOUNDER

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

***Note: Current and adjusted fees are available on the Copyright website at www.copyright.gov/docs/fees.html**

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Mail the form to:
Copyright I&R/Recordation
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Washington, DC 20024



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