

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

Full Legal Name of Service Provider: Halsbrook Inc.

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

Address of Service Provider: 304 Hudson Street, 6th Floor
New York, NY 10013

Name of Agent Designated to Receive Notification of Claimed Infringement: Halsey Meyer

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):
Halsey Meyer, 304 Hudson Street, 6th Floor
New York, NY 10013

Telephone Number of Designated Agent: ~~646-692-4421~~ 646-692-4421

Facsimile Number of Designated Agent: 646-692-6763

Email Address of Designated Agent: halsey@halsbrook.com

Signature of Officer or Representative of the Designating Service Provider: _____
Date: June 15, 2012

Typed or Printed Name and Title: Halsey Meyer, CEO

**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:
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Washington, DC 20024



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