

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

Full Legal Name of Service Provider: MomsKidsBooks, L3C

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

Address of Service Provider: 214 West Lincolnway, #23, Cheyenne, WY 82001

Name of Agent Designated to Receive Notification of Claimed Infringement: Chad McAllister

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):
214 West Lincolnway, #23, Cheyenne, WY 82001

Telephone Number of Designated Agent: 307-509-0013

Facsimile Number of Designated Agent: 708-778-6912

Email Address of Designated Agent: admin@momskidsbooks.com

Signature of Representative of the Designating Service Provider: _____
Date: Nov 30, 2010

Typed or Printed Name and Title: Chad McAllister, President

**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**

Mail the form to:
**Copyright RRP
P.O. Box 71537
Washington, DC 20024**



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