

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

**Full Legal Name of Service Provider:** Raw Science, Inc.

**Alternative Name(s) of Service Provider (including all names under which the service provider is doing business):** www.rawscience.tv

**Address of Service Provider:** 4570 Van Nuys Blvd. #568, Sherman Oaks, CA 91403

**Name of Agent Designated to Receive Notification of Claimed Infringement:** Michelle Katz

**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):  
4570 Van Nuys Blvd. #568, Sherman Oaks, CA 91403

**Telephone Number of Designated Agent:** (818) 935-9474

**Facsimile Number of Designated Agent:** \_\_\_\_\_

**Email Address of Designated Agent:** mkatzlaw1@gmail.com

**Signature of the Designating Service Provider:** \_\_\_\_\_  
**Date:** December 5, 2013

**Typed or Printed Name and Title:** Michelle Katz, General Counsel

**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](http://www.copyright.gov/docs/fees.html)**

Mail the form to:  
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