

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

Full Legal Name of Service Provider: WILD NEEDLE, INC.

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

Address of Service Provider: 201 SAN ANTONIO CIRCLE SUITE C240  
MOUNTAIN VIEW, CA 94040

Name of Agent Designated to Receive Notification of Claimed Infringement: HEIDI K. CARSON

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):

201 SAN ANTONIO CIRCLE SUITE C240  
MOUNTAIN VIEW, CA 94040

Telephone Number of Designated Agent: 650-948-4181

Facsimile Number of Designated Agent: n/a

Email Address of Designated Agent: heidi@wildneedle.com

Signature of Officer or Representative of the Designating Service Provider: [Redacted] Date: Aug. 11, 2011

Typed or Printed Name and Title: HEIDI CARSON, CFO

**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:  
Copyright I&R/Recordation  
P.O. Box 71537  
Washington, DC 20024

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