

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

Full Legal Name of Service Provider: Stinque.com

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

Address of Service Provider: 3632 State St., San Diego, CA 92103

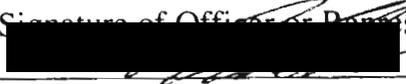
Name of Agent Designated to Receive Notification of Claimed Infringement: Mike Lee

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):
3632 State St., San Diego, CA 92103

Telephone Number of Designated Agent: 619-980-3669

Facsimile Number of Designated Agent: _____

Email Address of Designated Agent: nojo@stinque.com

Signature of Official Representative of the Designating Service Provider:
 _____ **Date:** 11/8/2010

Typed or Printed Name and Title: Mike Lee, Owner

**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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