Interim Designation of Agent to Receive Notification of Claimed Infringement

105 ing ime.	Full Legal Name of Service Provider: Diasposa Inc.
	Alternative Name(s) of Service Provider (including all names under which the service provider is doing business):
	Address of Service Provider: 15 Fton Crest, Manhasset, Ny 110
	Name of Agent Designated to Receive Notification of Claimed Infringement: Maxwell Salzberg
	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): 15 Ffor Crest, Mahhaset, Ng 11030
	Telephone Number of Designated Agent: (203) 451-3600
	Facsimile Number of Designated Agent:
	Email Address of Designated Agent: MAxwell@ Joindiaspora. com
	Signature of Officer of Representative of the Designating Service Provider: Date: 0 .] . 20
	Typed or Printed Name and Title: MAXnell Salzberg, President

*Note: Current and adjusted fees are available on the Copyright website at www.copyright.gov/docs/fees.html

Received JAN 2 0 2011

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



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