Interim Designation of Agent to Receive Notification of Claimed Infringement

Alternative Name(s) of Service Provider (including all names under which the servic provider is doing business): prephub.com	
Address of Service Pr	rovider: 50 Appleton St, Apt 1 Boston MA 02116
Name of Agent Desig Notification of Claim	gnated to Receive ned Infringement: Timothy Kofol
Full Address of Designor similar designation is not location): 50 Appleton St, Apt 1 I	gnated Agent to which Notification Should be Sent (a P.O. Box acceptable except where it is the only address that can be used in the geographic Boston MA 02116
Telephone Number o	of Designated Agent: 8572056197
Facsimile Number of	Designated Agent: 206 201 1197
	signated Agent: tkofol@highimpactnoise.com
Email Address of Des	
	r Representative of the Designating Service Provider: Date: 6/25/08

Note: This Interim Designation Must be Accompanied by a \$80 Filing Fee Made Payable to the Register of Copyrights.

Mail the form to:

Copyright GC/I&R P.O. Box 70400 Washington, DC 20024



