

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

Full Legal Name of Service Provider: Informio, Inc.

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

Address of Service Provider: 430 Bedford Street, Lexington, MA 02420

**Name of Agent Designated to Receive
Notification of Claimed Infringement:** Alfred L. Browne

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):
Informio, Inc., 430 Bedford Street, Lexington, MA 02420, Attn: Alfred L. Browne

Telephone Number of Designated Agent: (781) 861-9363 ext. 230

Facsimile Number of Designated Agent: (781) 861-9085

Email Address of Designated Agent: abrowne@informio.com

Sign _____ or Representative of the Designating Service Provider:
Date: February 22, 2001

Typed or Printed Name and Title: Alfred L. Browne, Vice President and General Counsel

**Note: This Interim Designation Must be Accompanied by a \$20 Filing Fee
Made Payable to the Register of Copyrights.**

RECEIVED

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