

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

Full Legal Name of Service Provider: Jonas Inc.

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

Address of Service Provider: 881 W. State Rd #140435, Pleasant Grove, UT 84062

Name of Agent Designated to Receive Notification of Claimed Infringement: Charles F. Mathias

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):
942 Windemere Dr. NW, Salem, OR 97304-2722

Telephone Number of Designated Agent: 503-589-0752

Facsimile Number of Designated Agent: 503-362-2361

Email Address of Designated Agent: dmca.jonas.inc@gmail.com

Signature of Officer or Representative of the Designating Service Provider: _____
Date: May 12, 2006

Typed or Printed Name and Title: Charles F. Mathias, Agent

Note: This Interim Designation Must be Accompanied by a \$30 Filing Fee Made Payable to the Register of Copyrights.

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SCANNED 06 07 - 2006