

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

Full Legal Name of Service Provider: KACE Networks, Inc.

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

Address of Service Provider: 1616 North Shoreline Blvd., Suite B, Mountain View, CA 940

Name of Agent Designated to Receive
Notification of Claimed Infringement: Rob Meinhardt

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):
1616 North Shoreline Blvd., Suite B
Mountain View, California 94043

Telephone Number of Designated Agent: (888) 522-3638

Facsimile Number of Designated Agent: (650) 649-1806

Email Address of Designated Agent: support@KACE.com

Signature of Officer or Representative of the Designating Service Provider: _____
Date: 5/3/2007

Typed or Printed Name and Title: Rob Meinhardt
CEO

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



RECEIVED

JUN 04 2007
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SCANNED 06 15-2007