

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

Full Legal Name of Service Provider: LucidView, Inc.

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

Address of Service Provider: 2100 Walnut, Apt. 6C, Philadelphia, PA
19103

Name of Agent Designated to Receive Notification of Claimed Infringement: Jonathan Oleinick

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):
Jonathan Oleinick, 2100 Walnut, Apt 6C, Philadelphia, PA
19103

Telephone Number of Designated Agent: 215-523-8597

Facsimile Number of Designated Agent: 253-595-6903

Email Address of Designated Agent: jonathan@lucidview.com

Identify the Interim Designation to be Amended, by Service Provider Name and Filing Date, so that it may be Readily Located in the Directory Maintained by the Copyright Office: None

**NO OTHER FILING
REC'D PER CO FILES**

Name of the Designating Service Provider: _____
Date: 11/16/00

Typed or Printed Name and Title: JONATHAN OLEINICK, PRESIDENT

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

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