

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

Full Legal Name of Service Provider: Matrix Development, LLC

Alternative Name(s) of Service Provider (including all names under which the service provider is doing business): Matrix Marketing Services, Matrix Consulting, Matrix Health Science, Matrix Health Sciences, Matrix Scientific Systems
MatrixESFL, Matrix Literacy, MHACC

Address of Service Provider: 113 Robyn Ridge Mount Horeb, WI 53572

Name of Agent Designated to Receive Notification of Claimed Infringement: James A. Spellman

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):
113 Robyn Ridge Mount Horeb, WI 53572

Telephone Number of Designated Agent: 608-437-4494

Facsimile Number of Designated Agent: 509-472-4298

Email Address of Designated Agent: JS@Matrixdevelopment.com

Signature of Officer or Representative of the Designating Service Provider: _____

Date: 6/10/2008

Typed or Printed Name and Title: James A. Spellman - President

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

SCANNED 07-23/2008

RECEIVED

JUN 13 2008

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