

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

Full Legal Name of Service Provider: Net Management Services, LLC

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

Address of Service Provider: 2320 NE 9th Street, Ft. Lauderdale, FL 33304

Name of Agent Designated to Receive Notification of Claimed Infringement: Steven W. Workman, Esq.

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):

2320 NE 9th Street
Fort Lauderdale, Florida 33304

Telephone Number of Designated Agent: 954.563.9008

Facsimile Number of Designated Agent: 954.563.6714

Email Address of Designated Agent: sww@netmgt.com

Signature of Officer ~~Representative~~ of the Designating Service Provider: _____
Date: 6/4/01

Typed or Printed Name and Title: Steven W. Workman
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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