

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

Full Legal Name of Service Provider: PANDEMIC MITIGATION SOLUTIONS, INC.

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

Address of Service Provider: 24 W. Pennsylvania Avenue, Suite 2002, Towson, MD 21204

Name of Agent Designated to Receive
Notification of Claimed Infringement: Carl Kirts

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):

24 W. Pennsylvania Avenue, Suite 2002, Towson, MD 21204

Telephone Number of Designated Agent: (410) 274-7354

Facsimile Number of Designated Agent: (866) 688-4976

Email Address of Designated Agent: ckirts@pandemicmitigation.com

Signature of _____, _____, _____
_____ Attorney-in-Charge of the Designating Service Provider:
Date: March 21, 2008

Typed or Printed Name and Title: Paula D. Miller, Attorney

SCANNED 05 / 10 - 2008

**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



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