

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

Full Legal Name of Service Provider: PLAYLINK, INC.

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

Address of Service Provider: 251 Park Ave S 12th Floor
NY NY 10010

Name of Agent Designated to Receive Notification of Claimed Infringement: Greg Bailey

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): Same

Telephone Number of Designated Agent: 212 677 790 X

Facsimile Number of Designated Agent: 212 375 9199

Email Address of Designated Agent: greg@playlink.com

Signature _____ of the Designating Service Provider:
Date: July 5 2000

Typed or Printed Name and Title: Greg Bailey
Authorized Signatory officer + Director

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

RECEIVED

JUL 11 2000

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