

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

Full Legal Name of Service Provider: Positive Networks, Inc.

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

Address of Service Provider: 8500 W. 110th St., Suite 400
Overland Park, KS 66210

Name of Agent Designated to Receive Notification of Claimed Infringement: Christopher C. Wren

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):

8500 W. 110th St., Suite 400
Overland Park, KS 66210

Telephone Number of Designated Agent: 913-469-0005 x226

Facsimile Number of Designated Agent: 707-897-7454

Email Address of Designated Agent: pnlegal@positivenetworks.net

Signature _____ **representative of the Designating Service Provider:**
Date: 6/24/02

Typed or Printed Name and Title: Christopher C. Wren
Vice President of Product Development

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

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