

**INTERIM DESIGNATION OF AGENT**  
**TO RECEIVE NOTIFICATION OF CLAIMED INFRINGEMENT**

Presented below is the information required pursuant to 37 C.F.R. § 201.38 with respect to interim designation of an agent to receive notification of claimed infringement.

(1) Name and Address of Service Provider:

Prism Rhode Island Operations, LLC  
770 Broadway – 15<sup>th</sup> Floor  
New York, New York 10003

(2) Name Under Which Service Provider is Doing Business:

Prism Rhode Island Operations, LLC

(3) Name of Agent Designated to Receive Notification of Claimed Infringement:

Marni J. Shapiro, Regulatory Compliance Administrator

(4) Address of Designated Agent:

Prism Rhode Island Operations, LLC  
1667 K Street, N.W.  
Suite 200  
Washington, D.C. 20006

(5) Telephone Number, Facsimile Number and Electronic Address of Designated Agent:

(202) 263-7971 (phone)  
(202) 263-7978 (fax)  
mshapiro@prismcsi.net (E-mail)

PRISM RHODE ISLAND OPERATIONS,  
LLC

B. \_\_\_\_\_  
Randall B. Lowe  
Manager

102708771



Date: October 20, 1999

**RECEIVED**

OCT 25 1999  
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