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

Full Legal Name of Service Provider: KESORT SCOPE, LEC
Alternative Name(s) of Service Provider (including all names under which the service provider is doing business): Resour Scope, com, Resour Scope
- Physicia -> 90 Riverwood Deros, NEW HAMPSON, NH 03250
Address of Service Provider: P.O. Box 996, LINCOLN, NH 68251
Name of Agent Designated to Receive  Notification of Claimed Infringement: MARK W. LACLARE
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):  90 Liveewood Developed New Hampton, NH 0325Cp
Telephone Number of Designated Agent: 603-744-2550
Facsimile Number of Designated Agent: 605-463-8609
Email Address of Designated Agent: mlaclair & lesortscope . com
Date:
Typed or Printed Name and Title: MARK. W. LACLARE, PRESIDENT

Note: This Interim Designation Must be Accompanied by a \$30 Filing Fee Made Payable to the Register of Copyrights.

RECEIVED

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