

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

Full Legal Name of Service Provider: Rural Connections

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

Address of Service Provider: 416 South Broadway, Rochester, MN 55904

**Name of Agent Designated to Receive
Notification of Claimed Infringement:** Kevin S. Lapidus

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):
OneMain.com, Inc., 1860 Michael Faraday Drive, Suite 200, Reston, VA 20190

Telephone Number of Designated Agent: (703) 375-3000

Facsimile Number of Designated Agent: (703) 375-3160

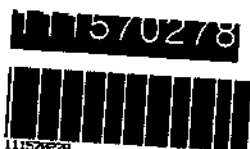
Email Address of Designated Agent: Agent@onemain.com

Signature of Officer or Representative of the Designating Service Provider:

Date: 2/11/00

Typed or Printed Name and Title: Stephen E. Smith, Director

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



RECEIVED

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