

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

**Full Legal Name of Service Provider:** Rx-360 International Pharmaceutical Supply  
Chain Consortium

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

**Address of Service Provider:** 1500 K Street, NW, Ste 1100, Washington, DC 20005

**Name of Agent Designated to Receive  
Notification of Claimed Infringement:** Maureen Hardwick

**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):  
c/o Drinker Biddle & Reath LLP, 1500 K Street, NW, Suite 1100, Washington, DC 20005

**Telephone Number of Designated Agent:** 202.230.5133

**Facsimile Number of Designated Agent:** 202.842.8465

**Email Address of Designated Agent:** rx360@dbr.com

**Signature of Officer or Representative of the Designating Service Provider:**

[Redacted Signature] Date: 2/24/2010

**Typed or Printed Name and Title:** Maureen Hardwick, Partner

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

**\*Note: Current and adjusted fees are available on the Copyright website at  
[www.copyright.gov/docs/fees.html](http://www.copyright.gov/docs/fees.html)**

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**APR 07 2010**

Mail the form to:  
Copyright GC/RRP  
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Washington, DC 20024

*SR # 1-344490115*

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**Received**

**FEB 25 2009**

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