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

Alternative Name(s) of Service Provider (including all names under which the service provider is doing business): schoolnet.com	
Address of S	ervice Provider: 525 7th Avenue, 4th Floor, New York, NY 10018
Name of Age Notification o	ont Designated to Receive Of Claimed Infringement: Andrew Johns
Full Address or similar designa location):	of Designated Agent to which Notification Should be Sent (a P.O. Box ation is not acceptable except where it is the only address that can be used in the geographic e, 4th Floor, New York, NY 10018
Telephone Nu	imber of Designated Agent: 646-496-9000
Facsimile Nu	mber of Designated Agent: 212-675-0815
Email Addres	s of Designated Agent: reportmisuse@schoolnet.com
Signature of O	fficer or Representative of the Designating Service Provider:  Date: 3/24/08
Typed or Print Chief Financial	ed Name and Title: C. Andrew Johns, Chief Operating Officer and



