

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

Full Legal Name of Service Provider: Skytap, Inc.

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

Address of Service Provider: 710 Second Avenue, Suite 1130, Seattle, WA 98104

Name of Agent Designated to Receive Notification of Claimed Infringement: Scott Roza

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):

710 Second Avenue, Suite 1130

Seattle, WA 98104

Telephone Number of Designated Agent: 206-310-2086

Facsimile Number of Designated Agent: 206-299-8503

Email Address of Designated Agent: sroza@skytap.com

Signature of Officer or Representative of the Designating Service Provider:

_____ **Date:** November 30, 2011

Typed or Printed Name and Title: Scott Roza, CEO

Scanned

JAN 10 2012

Received

DEC 07 2011

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