Interim Designation of Agent to Receive Notification of Claimed Infringement

Full Legal Name of Service Provider: Socializr, Inc.	
Alternative Name(s) of Service Provider (including all names under which to provider is doing business): Socialize, Socialize, Com	he servic
Address of Service Provider: 25 Stillman St., Suite 200	
Name of Agent Designated to Receive Notification of Claimed Infringement: Toni Graham	
Full Address of Designated Agent to which Notification Should be Sent (a P.O or similar designation is not acceptable except where it is the only address that can be used in the geoglocation): 25 Stillman St., Suite 200	. Box raphic
Telephone Number of Designated Agent: 415-358-9582	
Facsimile Number of Designated Agent: 415-358-9583	
Email Address of Designated Agent: toni@socializr.com	
Signature of Officer or Representative of the Designating Service Provider: Date: 4/1/07	
Typed of Printed Name and Title: Jonathan Abrams, CEO	

Note: This Interim Designation Must be Accompanied by a \$80 Filing Fee Made Payable to the Register of Copyrights.



RECEIVED

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