

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

Full Legal Name of Service Provider: Unigraphics Solutions, Inc.

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

Address of Service Provider: 10824 Hope Street, Cypress, California 90630

Name of Agent Designated to Receive Notification of Claimed Infringement: Steven L. Page

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):
Unigraphics Solutions, Inc.
5400 Legacy Dr., M/S H3-3A-05
Plano, TX 75024

Telephone Number of Designated Agent: (972) 605-5568

Facsimile Number of Designated Agent: (972) 605-5616

Email Address of Designated Agent: steven.page@eds.com

Identify the Interim Designation to be Amended, by Service Provider Name and Filing Date, so that it may be Readily Located in the Directory Maintained by the Copyright Office: 113433449, April 28, 2000

Signature of Representative of the Designating Service Provider: _____
Date: July, 10, 2002

Typed or Printed Name and Title: Lisa V. Thomas
Assistant Secretary
Unigraphics Solutions, Inc.

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

RECEIVED

OCT 18 2002

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