

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

Full Legal Name of Service Provider: URON, Inc.

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

Address of Service Provider: 533 Sixth Avenue NW Rochester MN 55901

Name of Agent Designated to Receive Notification of Claimed Infringement: Michael Anderson

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):  
533 Sixth Avenue NW  
Rochester, MN 55901

Telephone Number of Designated Agent: 800-444-7223

Facsimile Number of Designated Agent: 507-288-0831

Email Address of Designated Agent: manderson@uron.cc

Signature of Officer or Representative of the Designating Service Provider: \_\_\_\_\_  
Date: June 2, 2003

Typed or Printed Name and Title: Michael Anderson  
Director of operations

**Note: This Interim Designation Must be Accompanied by a \$30 Filing Fee  
Made Payable to the Register of Copyrights.**

**RECEIVED**

JUN 09 2003

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