

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

Full Legal Name of Service Provider: fusionOne, Inc.

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

Address of Service Provider: 55 Almaden Boulevard, San Jose, CA 95113

**Name of Agent Designated to Receive
Notification of Claimed Infringement:** Marianne Hassett

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):

fusionOne, Inc., 55 Almaden Boulevard, San Jose, CA 95113

Attention: Marianne Hassett

Telephone Number of Designated Agent: (408) 282-1200

Facsimile Number of Designated Agent: (408) 282-2333

Email Address of Designated Agent: mhassett@fusionone.com

Signature of _____ or representative of the Designating Service Provider:

Date: 5-11-00

Typed or Printed Name and Title: Marianne Hassett, Intellectual Property Counsel

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

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