

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

**Full Legal Name of Service Provider:** LocalToolbox Corporation

**Alternative Name(s) of Service Provider (including all names under which the service provider is doing business):** LocalToolbox Corp., LocalToolbox, LTBX, PortalReady

**Address of Service Provider:** 990 A Street, Suite 307, San Rafael, CA 94901

**Name of Agent Designated to Receive  
Notification of Claimed Infringement:** James K Robbins

**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):  
LocalToolbox, 990 A Street, Suite 307, San Rafael, CS 94901

**Telephone Number of Designated Agent:** 415-456-9800 x205

**Facsimile Number of Designated Agent:** 415-456-4274

**Email Address of Designated Agent:** jrobbins@ltbx.com

**Signature of Officer or Representative of the Designating Service Provider:**  
[Signature] **Date:** 12/28/06

**Typed or Printed Name and Title:** James K. Robbins, President & CEO

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

SCANNED 01 22 - 2007



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