

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

Full Legal Name of Service Provider: Webridge, Inc.

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

Address of Service Provider: 1925 NW AmberGlen Parkway

**Name of Agent Designated to Receive
Notification of Claimed Infringement:** Lynn Sunahara

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):
1925 NW AmberGlen Parkway
Beaverton, OR 97006

Telephone Number of Designated Agent: (503) 601-4124

Facsimile Number of Designated Agent: (503) 601-4001

Email Address of Designated Agent: lynns@webridge.com

Signature of Officer or Representative of the Designating Service Provider: _____
Date: 6/12/00

Typed or Printed Name and Title: Mark Anastas
Chief Operating Officer

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

RECEIVED
JUN 19 2000
COPYRIGHT OFFICE

114940952

