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

Full Legal Name of Service Provider: WorkPlace Group, Inc.	
Alternative Name(s) of Service Provider (including all names under which the service provider is doing business): The work Place Group Inc.	ce
Address of Service Provider: 55 Madison Ave. Morristown, NJ 07960 OC 214 masn manison,	S
MADISON,	N
Name of Agent Designated to Receive	
Notification of Claimed Infringement: Steven Lindner, Ph.D.	
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):  WorkPlace Group. 55 Madison Ave. Morristown, NJ 07960	
Workstock Group, 214 morn st., madison, NJ 07940	
Telephone Number of Designated Agent: 973-377-4665	
Facsimile Number of Designated Agent: 973-377-3064	
Email Address of Designated Agent: Steven Lindner@workplacegroup.com	
Signature of Officer on Remandation of the Designating Service Provider:	
Date: 11/.22 /02	
Typed or Printed Name and Title: Steven Linder, Ph. D., President	

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



RECEIVED

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