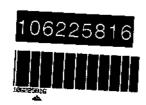
Interim Designation of Agent to Receive Notification of Claimed Infringement

Full Legal Name of Service Provider: MOTHER LODE INTERVET INC.
Alternative Name(s) of Service Provider (including all names under which the service provider is doing business):
<u> </u>
Address of Service Provider: 468 SOUTH WASHINGTON ST., SONONA, CP
Name of Agent Designated to Receive
Notification of Claimed Infringement: KIM ROBBEN
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
SONORA, CA 95370
SONORA, CA 95376
Telephone Number of Designated Agent: (209) 536-5800
Facsimile Number of Designated Agent: (209) 532 - 7941
Email Address of Designated Agent: <u>Kimo mlode.com</u>
Signature of Office of Representative of the Designating Service Provider: Date: 3/3/59
Typed or Printed Name and Title: KIMBERLY ROBBEN
WEB AND SERVICE MANAGER.

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



RECEIVED

MAR 2.9 1999

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