Interim Designation of Agent to Receive Notification of Claimed Infringement

Full Legal Name of Service Provider:	Vital Source Technologies Inc.
Alternative Name(s) of Service Provider (including all names under which the service provider is doing business): Vital Book Vital Viewer	
Address of Service Provider: 13.3	Fagetteville St. Mall, Ste 600 Raleigh, NC 27601
Name of Agent Designated to Receive Notification of Claimed Infringement:	
or similar designation is not acceptable except whe	which Notification Should be Sent (a P.O. Box are it is the only address that can be used in the geographic of the second of the
	ent: 919 - 755 - 8097
Facsimile Number of Designated Ager	nt: 919 - 755 - 8050
Email Address of Designated Agent:_	wc @ vital viewer, com
Signature of Officer or Representative of	of the Designating Service Provider:
Typed or Printed Name and Title:	leal Walker, CFO

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

SEP 1 1 2000

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