

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

Full Legal Name of Service Provider: S.R. Jacobs & Company, LLC

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

Address of Service Provider: 470 Olde Worthington Road, Suite 200
Westerville OH 43240 USA

Name of Agent Designated to Receive Notification of Claimed Infringement: SIEDLE RUBESH JACOBS

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):

470 Olde Worthington Road, Suite 200
Westerville OH 43240 USA

Telephone Number of Designated Agent: 614-839-6769

Facsimile Number of Designated Agent: _____

Email Address of Designated Agent: rubesh.jacobs@srjacobs.com

Signature of Officer or Representative of the Designating Service Provider: _____ Date: September 07, 2008

Typed or Printed Name and Title: SIEDLE RUBESH JACOBS
PRESIDENT

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

SCANNED 09 24 2008.

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