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

Alternative Name(s) of Service Provider (including all names under which the service provider is doing business): www.qbertskratchuniversity.com	
Address of Service Provider: 1297	Leaning Oak Dr Napa CA 94558
Name of Agent Designated to Rec	Paiva
Notification of Claimed Infringen	nent; Artistworks, Inc.
Full Address of Designated Agent or similar designation is not acceptable except location): 1297 Leaning Cake	to which Notification Should be Sent (a P.O. Box of where it is the only address that can be used in the geographic
Telephone Number of Designated	
Facsimile Number of Designated A	
Email Address of Designated Ager	nt: Patricia@artistworks.com
ignature of Officer on Representativ	ve of the Designating Service Provider:
	Date: 3-25-09
yped or Printed Name and Title: Pa	

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

Mail the form to:

SCANNED 04 09-2009

Copyright GC/I&R P.O. Box 70400 Washington, DC 20024



