

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

Full Legal Name of Service Provider: DOTmed.com, Inc

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

Address of Service Provider: 29 Broadway
NEW YORK, NY 10006

Name of Agent Designated to Receive Notification of Claimed Infringement: Matt Ulman

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): 29 Broadway
NEW YORK, NY 10006

Telephone Number of Designated Agent: 212-742-1200

Facsimile Number of Designated Agent: 212-742-1202

Email Address of Designated Agent: info@dotmed.com

Signature of Officer or Representative of the Designating Service Provider: [Signature]

Date: 6/20/08

Typed or Printed Name and Title: Matt Ulman - CTO

SCANNED 08-05/2008

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

RECEIVED

JUN 23 2008

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