

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

Full Legal Name of Service Provider: Data Back Systems LLC

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

Address of Service Provider: 13230 SW Thatcher Drive Beaverton OR
97008

Name of Agent Designated to Receive Notification of Claimed Infringement: Byron Lunz

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):

13230 SW Thatcher Drive
Beaverton, OR 97008

Telephone Number of Designated Agent: 503-312-1879

Facsimile Number of Designated Agent: 503-590-5667

Email Address of Designated Agent: bklunz@databack.com

Signature of Officer or Representative of the Designating Service Provider: _____
Date: 11-May-99

Typed or Printed Name and Title: Byron Lunz
owner

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

RECEIVED

MAY 18 1999

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