

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

Full Legal Name of Service Provider: Docstoc, Inc

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

Address of Service Provider: 8888 West Olympic Blvd, Suite 201
Beverly Hills, CA 90211

Name of Agent Designated to Receive Notification of Claimed Infringement: JASON NAZAR

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): _____

Telephone Number of Designated Agent: 310-246-2311

Facsimile Number of Designated Agent: 310 362 0444

Email Address of Designated Agent: Jason@docstoc.com

Signature of Officer or Representative of the Designating Service Provider: _____
Date: 12/20/2007

Typed or Printed Name and Title: JASON NAZAR ; President & CEO

SCANNED 1-31-2008

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



RECEIVED

DEC 27 2007
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