

Interim Designation of Agent to Receive Notification of Claimed Infringement

Full Legal Name of Service Provider: HAKIA INC

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

Address of Service Provider: 11-13 HUBERT STREET
NY, NY 10013

Name of Agent Designated to Receive Notification of Claimed Infringement: JOHN GRZYMALA

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):
11-13 HUBERT STREET
NY, NY 10013

Telephone Number of Designated Agent: 212.219.0255

Facsimile Number of Designated Agent: 212.219.1055

Email Address of Designated Agent: COPYRIGHT@HAKIA.COM

Signature of Officer or Representative of the Designating Service Provider: _____
Date: 01/18/2007

Typed or Printed Name and Title: MELEK PULATKONAK - COO

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

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