

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

Full Legal Name of Service Provider: GXStudios, Inc.

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

Address of Service Provider: 282 York Street Suite 203 New Haven, CT 06511

Name of Agent Designated to Receive Notification of Claimed Infringement: Brad Hargreaves

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):
282 York Street Suite 203 New Haven, CT 06511

Telephone Number of Designated Agent: (318) 780-0257

Facsimile Number of Designated Agent: (203) 562-6256

Email Address of Designated Agent: brad@gocrosscampus.com

Signature of Officer or Representative of the Designating Service Provider: _____ Date: 8/11/08

Typed or Printed Name and Title: Brad Hargreaves, President and CEO

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

Mail the form to:

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

SCANNED 09 / 04 / 2008

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