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

Full Legal Name of Service Provider: LiveMed Journal, LLC
Alternative Name(s) of Service Provider (including all names under which the service provider is doing business): www.livemedjournal.com
Address of Service Provider: 9000 Cypress Green Drive, Suite 105B, Jacksonville, FL 32256
Name of Agent Designated to Receive
Notification of Claimed Infringement: Pramod Jain
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):  8578 Ethans Glen Terrace
Jacksonville, FL 32256
Telephone Number of Designated Agent: (904) 636-6374 ext 12  Facsimile Number of Designated Agent: (904) 636-6379
Email Address of Designated Agent: pramod@indent.org
Signature of Officer or Refresentative of the Designating Service Provider:  Date: 3 14 06
Typed or Printed Name and Title: Pramod Jain, Managing Member and Registered Agent of the Designating Service Provider

Note: This Interim Designation Must be Accompanied by the applicable Filing Fee Made Payable to the Register of Copyrights.





A.T. 1 2006

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