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

Alternative Name(s) of S provider is doing busine	Service Provider (including all names under which the ss): i-comp.org	e service
Address of Service Provid	ler: BCM Box ICOMP; London, UK; WC1N 3XX	
Name of Agent Designate		
Full Address of Designate or similar designation is not accept location): 24 Bloomsbury Way, London	ed Agent to which Notification Should be Sent (a P.O. I ptable except where it is the only address that can be used in the geogra- n, UNITED KINGDOM; WC1A 2PX	30x phic
Telephone Number of Des	signated Agent: +44 (0) 20 7300 6150	
Facsimile Number of Desi	gnated Agent: +44 (0) 20 7300 6392	
Email Address of Designa	ted Agent: Jonathan.dinkeldein@bm.com	1//
Signature of Officer or Repr	Pase whitive of the Designating Service Provider:	
	Title: Jonathan Dinkeldein, Designated Agent	
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otc: This Interim Designa Inde Payable to the Regist		- 0000
ail the form to:	33415 03 2	5 - 20 0.8
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