

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

Full Legal Name of Service Provider: Institutional Limited Partners
Association ("ILPA")

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

Address of Service Provider: 55 Yonge St. #1201, Toronto, ON M5E 1J4

Name of Agent Designated to Receive
Notification of Claimed Infringement: Stephanie Malek

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):

55 Yonge St. #1201, Toronto, ON
M5E 1J4 Canada

Telephone Number of Designated Agent: 416-941-9393 x 2224

Facsimile Number of Designated Agent: 416-941-9307

Email Address of Designated Agent: smalek@ilpa.org

Signature of ~~Officer~~ or Representative of the Designating Service Provider: _____
Date: 08/24/09

Typed or Printed Name and Title: Stephanie Malek, Cybrarian

SCANNED 10 16-2009

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

***Note: Current and adjusted fees are available on the Copyright website at
www.copyright.gov/docs/fees.html**



RECEIVED

OCT 01 2009

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