

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

Full Legal Name of Service Provider: CCBill EU, Ltd.

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

Address of Service Provider: 2353 E. University Dr., Tempe, AZ 85281

Name of Agent Designated to Receive Notification of Claimed Infringement: Thomas A. Fisher

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):
2353 E. University Dr., Tempe, AZ 85281

Telephone Number of Designated Agent: (480) 449-7761

Facsimile Number of Designated Agent: (480) 449-8814

Email Address of Designated Agent: Tomf@cavecreek.com

Signature of Officer or Representative of the Designating Service Provider: _____ Date: 10/11/07

Typed or Printed Name and Title: Frank Cadwell, Treasurer

SCANNED 11-08/2007

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

Mail the form to:

Copyright GCI&R
P.O. Box 70400
Washington, DC 20024



RECEIVED

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