

Interim Designation of Agent to Receive Notification
of Claimed Infringement

Full Legal Name of Service Provider: CG4 SOLUTIONS, INC.

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

Address of Service Provider: 142 EAST 1200 SOUTH CENTERVILLE, UT 84014

Name of Agent Designated to Receive Notification of Claimed Infringement: MAXIM HOLLOWAY

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):

142 EAST 1200 SOUTH
CENTERVILLE, UT 84014

Telephone Number of Designated Agent: 801-294-4244 X103

Facsimile Number of Designated Agent: 801-294-4284

Email Address of Designated Agent: MAX@CG4.COM

Signature of Agent or Representative of the Designating Service Provider: _____

Date: 3-1-01

Typed or Printed Name and Title: MAXIM HOLLOWAY: DIRECTOR, MARKETING

Note: This Interim Designation Must be Accompanied by a \$20 Filing Fee Made Payable to the Register of Copyrights.

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