

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

Full Legal Name of Service Provider: CORECOMM INTERNET SERVICES, INC.

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

Address of Service Provider: 4660 S. HAGADORN ROAD, SUITE 420
EAST LANSING, MI 48823

Name of Agent Designated to Receive Notification of Claimed Infringement: MICHAEL STRUZINSKI

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):

4660 S HAGADORN ROAD, SUITE 420
EAST LANSING, MI 48823

Telephone Number of Designated Agent: 517-664-8169

Facsimile Number of Designated Agent: 517-664-8959

Email Address of Designated Agent: DMCA@CORE.COM

Signature of Officer or Representative of the Designating Service Provider: _____
Date: 3-8-2006

Typed or Printed Name and Title: MICHAEL STRUZINSKI
ABUSE COORDINATOR

Note: This Interim Designation Must be Accompanied by a \$30 Filing Fee Made Payable to the Register of Copyrights.

SCANNED 4/04/06

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