

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

**Full Legal Name of Service Provider:** DIGEX, Inc.

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

**Address of Service Provider:** 11700 Beltsville Road, 5th Floor, Beltsville, MD 20705

**Name of Agent Designated to Receive Notification of Claimed Infringement:** Vanessa L. Allen, Counsel

**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):  
11700 Beltsville Road, 5th Floor  
Beltsville, MD 20705

**Telephone Number of Designated Agent:** (240) 264-4714

**Facsimile Number of Designated Agent:** (240) 264-4710

**Email Address of Designated Agent:** vallen@digex.net

**Signature of Officer or Representative of the Designating Service Provider:**  
Date: 2-19-2001

**Typed or Printed Name and Title:** Paul G. Madison, Attorney for DIGEX, Inc.

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

**119593550**



**RECEIVED**

FEB 26 2001

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