

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

Full Legal Name of Service Provider: LeapFrog Enterprises, Inc.

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

Address of Service Provider: 6401 Hollis Street, Suite 100, Emeryville, CA 94608

Name of Agent Designated to Receive Notification of Claimed Infringement: Melisa Frick

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):
6401 Hollis Street, Suite 100, Emeryville, CA 94608

Telephone Number of Designated Agent: 510-420-5000

Facsimile Number of Designated Agent: 510-420-5011

Email Address of Designated Agent: trademarks@leapfrog.com

Signature of Officer or Representative of the Designating Service Provider: _____
Date: April 9, 2007

Typed or Printed Name and Title: Melisa Dawn Frick, Senior Paralegal

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



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