

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

Full Legal Name of Service Provider: LockBox.com, LLC

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

Address of Service Provider: 4151 Ashford Dunwoody Road, Suite 600,
Atlanta, Georgia 30319

**Name of Agent Designated to Receive
Notification of Claimed Infringement:** Christopher R. Williams

**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):**
4151 Ashford Dunwoody Road, Suite 600, Atlanta, Georgia 30319

Telephone Number of Designated Agent: 404-705-8000 x 231

Facsimile Number of Designated Agent: 404-705-8998

Email Address of Designated Agent: cwilliams@lockbox.com

Signature of Officer or Representative of the Designating Service Provider:

_____ **Date:** 6/28/00

Typed or Printed Name and Title: Christopher R. Williams

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

RECEIVED

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