

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



Full Legal Name of Service Provider: Audible Magic Corporation

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

Address of Service Provider: 985 University Ave, Suite 35

Name of Agent Designated to Receive Notification of Claimed Infringement: Vance Ikezoye

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):
985 University Ave, Suite 35, Los Gatos, CA 95032

Telephone Number of Designated Agent: 408-399-6405 x204

Facsimile Number of Designated Agent: 408-399-6406

Email Address of Designated Agent: v_ikezoye@audiblemagic.com

Signature of Officer or Representative of the Designating Service Provider:

Date: 1/26/2010

Typed or Printed Name and Title: CEO

SCANNED 2 - 19 - 20 1 0

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

***Note: Current and adjusted fees are available on the Copyright website at
www.copyright.gov/docs/fees.html**

Mail the form to:
Copyright GC/I&R
P.O. Box 70400
Washington, DC 20024

