

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

Full Legal Name of Service Provider: _____
XSPRADA CORPORATION

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

Address of Service Provider: 12885 Research Boulevard, Suite 202, Austin, Texas 78750

Name of Agent Designated to Receive Notification of Claimed Infringement: Christopher M. Piedmonte

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):
c/o XSPRADA, 12885 Research Boulevard, Suite 202, Austin, Texas 78750-3224

Telephone Number of Designated Agent: +1 (512) 651-5834

Facsimile Number of Designated Agent: +1 (512) 651-5844

Email Address of Designated Agent: webmaster@xsprada.com

Signature of Officer or Representative of the Designating Service Provider: _____
Date: June 24th, 2008

Typed or Printed Name and Title: Christopher M. Piedmonte, Chief Executive Officer

Note: This Interim Designation Must be Accompanied by a \$80 Filing Fee Made Payable to the Register of Copyrights.

Mail the form to:

Copyright GC/I&R
P.O. Box 70400
Washington, DC 20024

SCANNED 08 - 12 / 2008

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JUN 26 2008
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