A Interim Designation of Agent to Receive Notification of Claimed Infringement

Full Legal Name of Service Provider: BLACKATWORK A	110
Alternative Name(s) of Service Provider (including all names under which provider is doing business):	the service
Address of Service Provider: P.O. BOX 7924, Chorlotte 1	162827
Name of Agent Designated to Receive Notification of Claimed Infringement: Lisa Blackwell	
Full Address of Designated Agent to which Notification Should be Sent (a For similar designation is not acceptable except where it is the only address that can be used in the geological in the geological form of Designated Agent: (980) 939 -4	ographic
	317
Facsimile Number of Designated Agent:	
Email Address of Designated Agent: abuse a blackatwork.	m
Identify the Interim Designation to be Amended, by Service Provider Name and Date, so that it may be Readily Located in the Directory Maintained by the Confice: BLACKATWORK LLC, Oct. 10 200	pyright
Signature of Officer or Representative of the Designating Service Provider: Date: 0 + 1 4 , 2	007
Typed or Printed Name and Title: LISA Blackwell, manage	
0 1 1 01 - 2007	
Note: This Amended Interim Designation Must be Accompanied by a \$80 F	iling Fee
Made Payable to the Register of Copyrights. Mail the form to:	IVEL
161749680 OCT 2	4 2007 HT OFFICE

P.O. Box 70400 Washington, DC 2002