

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

Full Legal Name of Service Provider: Chromatic Life

Alternative Name(s) of Service Provider (including all names under which the service provider is doing business): eMedia Strategies, Inc.,
www.chromaticlife.com

Address of Service Provider: 20 California St., Ste. 201
San Francisco, California 94111

**Name of Agent Designated to Receive
Notification of Claimed Infringement:** Jeffrey T. Makoff, Esq.

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):

20 California St. Suite 201
San Francisco, California 94111

Telephone Number of Designated Agent: (415) 217-8806

Facsimile Number of Designated Agent: (415) 217-8818

Email Address of Designated Agent: jmakoff@chromaticlife.com

Signature of _____ or Representative of the Designating Service Provider:

Date: November 10, 1999

Typed or Printed Name and Title: Jeffrey T. Makoff, Esq., President

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

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