

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

Full Legal Name of Service Provider: ALIBRIS

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

Address of Provider: 1250 45TH STREET
EMERYVILLE, CA 94608

Name of Agent Designated to Receive Notification of Claimed Infringement:
SKIP RUDOLF

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):
1250 45TH STREET
EMERYVILLE, CA ~~94607~~ 94608

Telephone Number of Designated Agent: 510.594.4525

Facsimile Number of Designated Agent: 510.652.2403

Email Address of Designated Agent: SKIPR@ALIBRIS.COM

Signature of Officer or Representative of the Designating Service Provider: _____
Date: 5/10/00

Typed or Printed Name and Title: PAUL BANAS, Vice President of Marketing

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

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