Interim Designation of Agent to Receive Notification of Claimed Infringement

Full Legal Name of Service Provider: Indiana Sabrecom, Inc.
Alternative Name(s) of Service Provider (including all names under which the service provider is doing business): <u>ULBC-FM</u> , <u>UXFN-AM</u> , <u>UXFR-FM</u> , <u>UMCK-FM</u> , <u>UMCK-FM</u> , <u>WMCX-FM</u> , <u>WHBU-AM</u>
Address of Service Provider: 800 E. 29th Street, Muncie, TN 42302
Name of Agent Designated to Receive Notification of Claimed Infringement: ROBIN A SMITH
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): 4231 Salisbury Rd. Ste 225, Jacksonville, FL 32216
Telephone Number of Designated Agent: 904-674-0360
Facsimile Number of Designated Agent: 904-854-4596
Email Address of Designated Agent: Smithebybradio, com
ne Designating Service Provider: Date: Date: Date: Date:

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

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