Amended Interim Designation of Agent to Receive Notification of Claimed Infringement

Full Legal Name of Service Provider _	Colorado State University		
Alternative Name(s) of Service Provider	(including all names under which		
the service provider is doing business):	CSU, Board of Governors of the Colorado		
State University System, ACNS, colosta	ate.edu		
Address of Service Provider: ACN	S, 601 South Howes, Colorado State		
University, Fort Collins, CO 80523-1018	3		
Name of Agent Designated to Receive N	Notification of Claimed Infringement: Scott K. Baily		
Full Address of Designated Agent to whi	ch Notification should be sent		
(A P.0. Box or similar designation is not	acceptable except where it is the only address		
that can be used in the geographic loca ACNS, 601 South Howes, Colorado Sta	MANAGEM CLASS COLORS CO.		
The terms of the t	te University, Fort Collins, CO 80523-1018		
Telephone Number of Designated Agent	970.491.7655		
Facsimile Number of Designated Agent:	970.491.1958		
Email Address of Designated Agent: S	Scott.Baily@ColoState.edu		
Identify the Interim Designation to be Am	ended, by Service Provider Name and Filing Date,		
so that it may be Headily Located in the I	Directory Maintained by the Copyright Office		
Scott K. Baily, Colorado State University		6/26/08	
Signature of Officer or Representative of	the decimal-		
organization bit officer of representative of	the designing service provider	Date:	0/00
		_ Date: _	6/26/
Type or Printed Name and Title: Patrick J	Burns, VP for IT		
	QOMMEN O S		
NOTE: THIS AMENDED INTERIM DESIG	GNATION MUST BE ACCOMPANIED BY A 20.0	8	
\$80 FILING FEE MADE PAYABLE TO THE	HE REGISTER OF COPYRIGHTS.	-	
	The state of the s		

Mail the form to: Cupyright GC/I&R P.O. Box 70400 Washington, DC 20024

JUL 2 8 2008

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