

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

**Full Legal Name of Service Provider:** University of Massachusetts - President's Office

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

**Address of Service Provider:** President's Office, 333 South Street, 4th Floor, Shrewsbury, MA 01545

**Name of Agent Designated to Receive Notification of Claimed Infringement:** Lawrence Wilson

**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):  
University of Massachusetts, President's Office, 333 South Street, 4th Floor, Shrewsbury, MA 01545

**Telephone Number of Designated Agent:** 774-455-7975

**Facsimile Number of Designated Agent:** 777-455-7732

**Email Address of Designated Agent:** Lwilson@umassp.edu

Identify the Interim Designation to be Amended, by Service Provider Name and Filing Date, so that it may be Readily Located in the Directory Maintained by the Copyright Office: #162882041 Recd 10/20/09 Scanned 10/27/09

 of the Designating Service Provider:  
Date: May 9, 2014

**Typed or Printed Name and Title:** Lawrence Wilson, Lead Security Specialist

Scanned  
AUG 25 2014

Note: This Amended 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](http://www.copyright.gov/docs/fees.html)

Mail the form to:  
**Copyright I&R/Recordation**  
P.O. Box 71537  
Washington, DC 20024



**Received**  
JUL 23 2014  
Copyright Office