

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

Full Legal Name of Service Provider: Tennessee Technology Center at Shelbyville

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

Address of Service Provider: 1405 Madison Street, Shelbyville, TN 37160

Name of Agent Designated to Receive Notification of Claimed Infringement: Steve Mallard

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):
Tennessee Technology Center at Shelbyville, 1405 Madison St., Shelbyville, TN 37160

Telephone Number of Designated Agent: 931-685-5013 ext 149

Facsimile Number of Designated Agent: 831-685-5016

Email Address of Designated Agent: Steve.mallard@ttcshelbyville.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: 102015083, Copyright Office Received on March 9, 1999

Signature of Officer or Representative of the Designating Service Provider:
 : 10/11/12

Typed or Printed Name and Title: Mr. Ivan Jones, Director

**Scanned
DEC 14 2012**

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

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



**Received
NOV 20 2012
Copyright Office**