

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

Full Legal Name of Service Provider: Modern Language Association of America

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

Address of Service Provider: 26 Broadway, 3rd Floor, New York NY 10004

Name of Agent Designated to Receive Notification of Claimed Infringement: Kathleen Fitzpatrick

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):
Modern Language Association, 26 Broadway, 3rd Floor, New York NY 10004

Telephone Number of Designated Agent: 646-576-5110

Facsimile Number of Designated Agent: 646-835-4077

Email Address of Designated Agent: kfitzpatrick@mla.org

Signature of Designating Service Provider: _____
Date: 13 December 2012

Typed or Printed Name and Title: Rosemary G. Feal, Executive Director

**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**

Mail the form to:
**Copyright I&R/Recordation
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Washington, DC 20024**



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