

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

Full Legal Name of Service Provider: North Lake College

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

Address of Service Provider: 5001 N. MacArthur Blvd., Irving, TX 75038

Name of Agent Designated to Receive Notification of Claimed Infringement: Robert Wendland

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):
1601 South Lamar Street, Dallas, TX 75215

Telephone Number of Designated Agent: (214) 378-1703

Facsimile Number of Designated Agent: (214) 378-1730

Signature of Designating Service Provider: _____
Date: 3/25/2014

Typed or Printed Name and Title: Robert Wendland
General Counsel

**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
P.O. Box 71537
Washington, DC 20024



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