

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

**Full Legal Name of Service Provider:** Tennessee College of Applied Technology Athens

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

**Address of Service Provider:** P. O. Box 848, Athens, TN 37371-0848

**Name of Agent Designated to Receive Notification of Claimed Infringement:** Kim Davis

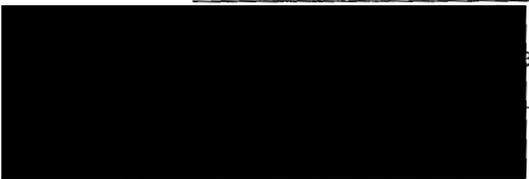
**Full Address of Designated Agent to which Notification Should be Sent** (a P.O. Box or similar designation is not acceptable except where it is the only address that can be used in the geographic location):  
Tennessee College of Applied Technology Athens Athens  
P. O. Box 848, 1635 Vo-Tech Dr., TN 37371-0848

**Telephone Number of Designated Agent:** 423-744-2814

**Facsimile Number of Designated Agent:** 423-744-2817

**Email Address of Designated Agent:** Kim.Davis@tcate Athens

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: 162340719; Copyright Office Received November 26, 2012



**Signature of the Designating Service Provider:** \_\_\_\_\_  
**Date:** 9/3/15  
**Stewart Smith, Director**

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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)

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