

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

**Full Legal Name of Service Provider:** University of Connecticut

**Alternative Name(s) of Service Provider (including all names under which the service provider is doing business):** UConn, State of Connecticut

**Address of Service Provider:** Gulley Hall, 352 Mansfield Road, Unit 2014, Storrs, CT 06269-2014

**Name of Agent Designated to Receive Notification of Claimed Infringement:** Jason Pufahl

**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 Information Technology Services, 196 Auditorium Road, Unit 3138, Storrs, CT 06269-3138

**Telephone Number of Designated Agent:** (860) 486-3743

**Facsimile Number of Designated Agent:** (860) 486-5744

**Email Address of Designated Agent:** Jason.Pufahl@uconn.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: Jason Pufahl, November 5, 2010

**Signature of the Designating Service Provider:** \_\_\_\_\_  
**Date:** 10/5/10

**Typed or Printed Name and Title:** Jason Pufahl, Chief Information Systems Security Officer

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 GC/RRP**  
**P.O. Box 71537**  
**Washington, DC 20024**



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