

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

Basic fee of \$105  
covers indexing  
of this one  
name.

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

Additional \$30  
per group of 10  
or fewer

**Alternative Name(s) of Service Provider (including all names under which the service provider is doing business):** UK, U of K, U of KY, UK HealthCare

**Address of Service Provider:** 101 Main Building, Lexington KY 40506

**Name of Agent Designated to Receive Notification of Claimed Infringement:** Michael G. Carr

**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):  
The University of Kentucky, 122 James Hardymon, Lexington KY 40506

**Telephone Number of Designated Agent:** (859) 218-4357

**Facsimile Number of Designated Agent:** (859) 323-1025

**Email Address of Designated Agent:** COPYRIGHT@UKY.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: University of Kentucky (Lexington), 20 February 2014



\_\_\_\_\_  
of the Designating Service Provider:  
Date: \_\_\_\_\_

**Typed or Printed Name and Title:** Vince J. Kellen, CIO, University of Kentucky

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 I&R/Recordation  
P.O. Box 71537  
Washington, DC 20024

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AUG 19 2015

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