MM10 (E) – REQUEST FOR THE RECORDING OF A CHANGE IN THE NAME OR ADDRESS OF THE REPRESENTATIVE

We strongly recommend that you use the online management of representative form to request the recording of a change of name/and or address of the representative.

This form is to be used only to request the recording of a change in the name or address of the recorded representative and not to appoint a new representative.

For use by the representative:
Number of continuation sheets:
Representative’s reference:

For use by the Office:
Office’s reference:

1. INTERNATIONAL REGISTRATION NUMBER(S)
This form may be used for several international registrations of the same representative.

2. NAME OF THE REPRESENTATIVE
As recorded in the International Register.
(a) Name:
(b) Address:
3. CHANGE IN NAME OR ADDRESS OF THE REPRESENTATIVE

(a) New name:

(b) New address:

(c) New e-mail address\(^1\):

(d) New telephone number\(^2\):

4. SIGNATURE OF THE HOLDER AND/OR THEIR REPRESENTATIVE

Holder (as recorded in the International Register):

*By signing this form, I declare that I am entitled to sign it under the applicable law.*

Name:

Signature:

Representative of the holder (as recorded in the International Register):

*By signing this form, I declare that I am entitled to sign it under the applicable law.*

Name:

Signature:

---

\(^1\) WIPO will send all communications concerning the international registration(s) in item 1 only to the e-mail address of the representative. Where there is no new e-mail address indicated in this form, all communications will be sent to the e-mail address already on record. The holder and the representative must ensure that the e-mail address indicated here is accurate and kept up to date.

\(^2\) Indicating a phone number is not required, but it will allow WIPO to reach your representative if needed.
5. SIGNATURE OF THE OFFICE PRESENTING THE REQUEST

Where the request is presented through an Office.

(a) **Name of the Office:**

(b) **Name and signature of the official signing on behalf of the Office:**
   By signing this form, I declare that I am entitled to sign it under the applicable law.

(c) **E-mail address of the contact person in the Office:**