REQUEST FOR THE RECORDING OF A
CHANGE IN NAME AND/OR ADDRESS OF THE REPRESENTATIVE
(Rule 25 of the Regulations under the Protocol)

IMPORTANT

1. This request may be presented to the International Bureau directly by the holder or through the Office of the Contracting Party of the holder.

2. 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.

This cover page must not be sent to the International Bureau.

Madrid System – Contacts

Madrid Customer Service opening hours:
Monday – Friday, 9:00 a.m. to 6:00 p.m. (Geneva time)
Telephone: + 41 22 338 86 86

Inquiries / submitting forms:
http://www.wipo.int/madrid/en/contact/

Mailing address

Madrid Operations Division
Madrid Registry
Brands and Designs Sector
World Intellectual Property Organization (WIPO)
34, Chemin des Colombettes
1211 Geneva 20
Switzerland
REQUEST FOR THE RECORDING OF A CHANGE
IN NAME AND/OR ADDRESS OF THE REPRESENTATIVE

For use by the representative
This request contains the following number of continuation sheets:

Representative’s reference: ...........................................

For use by the Office
Office’s reference: ..........................................................

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

NAME OF THE REPRESENTATIVE
(as recorded in the International Register)

   Name: ..................................................................................................................................................................................................................................
   Address: ....................................................................................................................................................................................................................

CHANGE IN NAME AND/OR ADDRESS OF THE REPRESENTATIVE
(indicate the change(s))

   New name: ........................................................................................................................................................................................................
   New address: ....................................................................................................................................................................................................
   New telephone: .............................................................  New fax: ........................................................................................................
   New e-mail address: .............................................................................................................................................................................

By providing an e-mail address, any further correspondence from the International Bureau related to this/these international registration(s) will be sent only electronically and, therefore, you will no longer receive any paper correspondence. Likewise, any further correspondence from the International Bureau related to other international applications or international registrations for which the same e-mail address has been, or will be, provided will also be sent only electronically. Please note that, for the purpose of electronic communication, there can be only one e-mail address recorded per each international registration.
### SIGNATURE BY THE HOLDER AND/OR HIS REPRESENTATIVE

<table>
<thead>
<tr>
<th>Holder</th>
<th>Representative of the holder</th>
</tr>
</thead>
<tbody>
<tr>
<td>(as recorded in the International Register)</td>
<td>(as recorded in the International Register)</td>
</tr>
</tbody>
</table>

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

<table>
<thead>
<tr>
<th>Name:</th>
<th>Name:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Signature:</td>
<td>Signature:</td>
</tr>
</tbody>
</table>

### OFFICE OF THE CONTRACTING PARTY OF THE HOLDER PRESENTING THE REQUEST

(Where this request is presented through an Office)

<table>
<thead>
<tr>
<th>Name of the Office:</th>
<th></th>
</tr>
</thead>
</table>

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

<table>
<thead>
<tr>
<th>Name and signature of the official signing on behalf of the Office:</th>
<th></th>
</tr>
</thead>
</table>

**Name and e-mail address of the contact person in the Office:**

| | |