

MM4 (E) – DESIGNATION SUBSEQUENT TO THE INTERNATIONAL REGISTRATION

For use by the holder:

Number of continuation sheets
for several holders:

Number of continuation sheets:

Number of MM17 forms:

MM18 form (if applicable, check the box)

Holder's reference:

For use by the Office of origin:

Office's reference:

1. INTERNATIONAL REGISTRATION NUMBER

2. HOLDER OF THE INTERNATIONAL REGISTRATION¹

As **recorded** in the International Register.

If there is **more than one holder**, indicate the number of holders and complete the "Continuation Sheet for Several Holders".

Number of holders:

(a) **Name:**

(b) **Address:**

¹ If there is more than one holder, indicate the details for the first holder only and provide the name(s) and address(es) of the additional holder(s) in the "Continuation Sheet for Several Holders" attached to this form.

3. APPOINTMENT OF A (NEW) REPRESENTATIVE²

Only complete this item if you are appointing a (new) representative.

(a) Name:

(b) Address:

(c) E-mail address³:

(d) Telephone number⁴:

SIGNATURE OF THE HOLDER APPOINTING THE ABOVE (NEW) REPRESENTATIVE⁵

The holder **must sign** this item in order for the appointment to be recorded.

Signature:

² You **must** indicate the name, address and e-mail address of the (new) representative (and sign this item) otherwise, WIPO cannot record the appointment. Please note that the appointment of a new representative will replace any representative previously appointed.

³ When a representative is appointed, WIPO will send all communications concerning this request for subsequent designation and the international registration it concerns **only** to the e-mail address of the representative. The holder and the representative must ensure that the e-mail address indicated here is accurate and kept up to date.

⁴ Indicating a phone number is not required, but it will allow WIPO to reach your representative if needed.

⁵ If the signature of the holder is missing, WIPO will process the request but the (new) representative will not be recorded.

4. DESIGNATIONS⁶

Check the corresponding boxes:

- | | | | |
|---|--|---|---|
| <input type="checkbox"/> AF Afghanistan | <input type="checkbox"/> DZ Algeria | <input type="checkbox"/> KZ Kazakhstan | <input type="checkbox"/> RO Romania |
| <input type="checkbox"/> AG Antigua and Barbuda | <input type="checkbox"/> EE Estonia ^h | <input type="checkbox"/> LA Lao People's Democratic Republic | <input type="checkbox"/> RS Serbia |
| <input type="checkbox"/> AL Albania | <input type="checkbox"/> EG Egypt | <input type="checkbox"/> LI Liechtenstein | <input type="checkbox"/> RU Russian Federation |
| <input type="checkbox"/> AM Armenia | <input type="checkbox"/> EM European Union ^a | <input type="checkbox"/> LR Liberia | <input type="checkbox"/> RW Rwanda |
| <input type="checkbox"/> AT Austria | <input type="checkbox"/> ES Spain | <input type="checkbox"/> LS Lesotho ^b | <input type="checkbox"/> SD Sudan |
| <input type="checkbox"/> AU Australia | <input type="checkbox"/> FI Finland | <input type="checkbox"/> LT Lithuania | <input type="checkbox"/> SE Sweden |
| <input type="checkbox"/> AZ Azerbaijan | <input type="checkbox"/> FR France | <input type="checkbox"/> LV Latvia | <input type="checkbox"/> SG Singapore ^b |
| <input type="checkbox"/> BA Bosnia and Herzegovina | <input type="checkbox"/> GB United Kingdom ^{b,k} | <input type="checkbox"/> MA Morocco | <input type="checkbox"/> SI Slovenia |
| <input type="checkbox"/> BG Bulgaria | <input type="checkbox"/> GE Georgia | <input type="checkbox"/> MC Monaco | <input type="checkbox"/> SK Slovakia |
| <input type="checkbox"/> BH Bahrain | <input type="checkbox"/> GG Guernsey ^{b,l} | <input type="checkbox"/> MD Republic of Moldova | <input type="checkbox"/> SL Sierra Leone |
| <input type="checkbox"/> BN Brunei Darussalam ^b | <input type="checkbox"/> GH Ghana | <input type="checkbox"/> ME Montenegro | <input type="checkbox"/> SM San Marino |
| <input type="checkbox"/> BQ Bonaire, Saint Eustatius and Saba ^{f,g} | <input type="checkbox"/> GM Gambia | <input type="checkbox"/> MG Madagascar | <input type="checkbox"/> ST Sao Tome and Principe |
| <input type="checkbox"/> BR Brazil ^{e,h,i} | <input type="checkbox"/> GR Greece | <input type="checkbox"/> MK North Macedonia | <input type="checkbox"/> SX Sint Maarten (Dutch part) ^f |
| <input type="checkbox"/> BT Bhutan | <input type="checkbox"/> HR Croatia | <input type="checkbox"/> MN Mongolia | <input type="checkbox"/> SY Syrian Arab Republic |
| <input type="checkbox"/> BW Botswana | <input type="checkbox"/> HU Hungary | <input type="checkbox"/> MW Malawi ^b | <input type="checkbox"/> SZ Eswatini |
| <input type="checkbox"/> BX Benelux ^j | <input type="checkbox"/> ID Indonesia | <input type="checkbox"/> MX Mexico | <input type="checkbox"/> TH Thailand |
| <input type="checkbox"/> BY Belarus | <input type="checkbox"/> IE Ireland ^b | <input type="checkbox"/> MY Malaysia ^b | <input type="checkbox"/> TJ Tajikistan |
| <input type="checkbox"/> CA Canada | <input type="checkbox"/> IL Israel | <input type="checkbox"/> MZ Mozambique ^b | <input type="checkbox"/> TM Turkmenistan |
| <input type="checkbox"/> CH Switzerland | <input type="checkbox"/> IN India ^{b,h} | <input type="checkbox"/> NA Namibia ^h | <input type="checkbox"/> TN Tunisia |
| <input type="checkbox"/> CN China | <input type="checkbox"/> IR Iran (Islamic Republic of) | <input type="checkbox"/> NO Norway | <input type="checkbox"/> TR Turkey |
| <input type="checkbox"/> CO Colombia | <input type="checkbox"/> IS Iceland | <input type="checkbox"/> NZ New Zealand ^b | <input type="checkbox"/> TT Trinidad and Tobago ^b |
| <input type="checkbox"/> CU Cuba ^e | <input type="checkbox"/> IT Italy | <input type="checkbox"/> OA African Intellectual Property Organization (OAPI) ^c | <input type="checkbox"/> UA Ukraine |
| <input type="checkbox"/> CW Curacao ^f | <input type="checkbox"/> JP Japan ^e | <input type="checkbox"/> OM Oman | <input type="checkbox"/> US United States of America ^d |
| <input type="checkbox"/> CY Cyprus | <input type="checkbox"/> KE Kenya | <input type="checkbox"/> PH Philippines ^h | <input type="checkbox"/> UZ Uzbekistan |
| <input type="checkbox"/> CZ Czech Republic | <input type="checkbox"/> KG Kyrgyzstan | <input type="checkbox"/> PL Poland | <input type="checkbox"/> VN Viet Nam |
| <input type="checkbox"/> DE Germany | <input type="checkbox"/> KH Cambodia | <input type="checkbox"/> PT Portugal | <input type="checkbox"/> WS Samoa |
| <input type="checkbox"/> DK Denmark | <input type="checkbox"/> KP Democratic People's Republic of Korea | | <input type="checkbox"/> ZM Zambia |
| | <input type="checkbox"/> KR Republic of Korea | | <input type="checkbox"/> ZW Zimbabwe |

⁶ You can find information on the procedures in national or regional offices in the Member Profile Database, available at www.wipo.int/madrid/memberprofiles.

- ^a The designation of the **European Union** covers its Member States (Austria, Belgium, Bulgaria, Croatia, Cyprus, Czech Republic, Denmark, Estonia, Finland, France, Germany, Greece, Hungary, Ireland, Italy, Latvia, Lithuania, Luxembourg, Malta, The Netherlands, Poland, Portugal, Romania, Slovakia, Slovenia, Spain, Sweden).

If the **European Union** is designated, it is compulsory to indicate a second language before the Office of the European Union. The second language must be chosen from among the following five languages, but may not be the language of the international application from which the international registration indicated in item 1 resulted, regardless of the language of the present subsequent designation. Thus, for example, if the international application was filed in French and this subsequent designation is in English, French may not be selected as the second language (check one box only):

English French German Italian Spanish

Moreover, if the applicant wishes to claim the **seniority** of an earlier mark registered in, or for, a Member State of the European Union, the **official form MM17 must be annexed** to the present subsequent designation.

- ^b By designating **Brunei Darussalam, Guernsey, India, Ireland, Lesotho, Malawi, Malaysia, Mozambique, New Zealand, Singapore, Trinidad and Tobago** or the **United Kingdom**, the holder declares that he/she has the intention that the mark will be used by him/her or with his/her consent in that country in connection with the goods and services identified in the present subsequent designation.
- ^c The designation of the African Intellectual Property Organization (**OAPI**) covers the following Member States: Benin, Burkina Faso, Cameroon, Central African Republic, Chad, Comoros, Congo, Côte d'Ivoire, Equatorial Guinea, Gabon, Guinea, Guinea-Bissau, Mali, Mauritania, Niger, Senegal, Togo.
- ^d If the **United States of America** is designated, it is **compulsory to annex** to the present international application the official form (**MM18**) containing the declaration of intention to use the mark required by this Contracting Party. Item 6(a) of the present form should also be completed.
- ^e **Cuba, Brazil** and **Japan** have made a notification under Rule 34(3)(a) of the Common Regulations. Their respective **individual fees are payable in two parts**. Therefore, if **Cuba, Brazil** or **Japan** is designated, only the first part of the applicable individual fee is payable at the time of filing the present international application. The second part will have to be paid only if the Office of the Contracting Party concerned is satisfied that the mark which is the subject of the international registration qualifies for protection. The date by which the second part must be paid, and the amount due, will be notified to the holder of the international registration at a later stage.
- ^f Territorial entity previously part of the former Netherlands Antilles.
- ^g Protection in **BQ** (Bonaire, Saint Eustatius and Saba) is granted automatically with the designation (see [Information Notice No. 27/2011](#)).
- ^h **Brazil, Estonia, India, Namibia** and the **Philippines** have made the declaration referred to in Article 14(5) of the Protocol. Accordingly, it is not possible to subsequently designate **Brazil** in respect of international registrations effected prior to October 2, 2019, **Estonia** in respect of international registrations effected prior to November 18, 1998, **India** in respect of international registrations effected prior to July 8, 2013, **Namibia** in respect of international registrations effected prior to June 30, 2004, and the **Philippines** in respect of international registrations effected prior to July 25, 2012.
- ⁱ By designating **Brazil**, the holder declares that the holder, or a company controlled by the holder, effectively and lawfully conducts business in connection with the goods and services for which Brazil is being designated.
- ^j The designation of **Benelux** covers the following States: Belgium, Luxembourg and the Netherlands.
- ^k The designation of the **United Kingdom** covers England, Wales, Scotland, Northern Ireland, the British Overseas Territory of the Falkland Islands (Malvinas) and Gibraltar, as well as the two British Crown Dependencies of the Isle of Man and Jersey (see Information Notices No. [38/2015](#) and [77/2020](#)).
- ^l The Bailiwick of **Guernsey** is a self-governing British Crown Dependency (see Information Notice No. [77/2020](#)).

5. GOODS AND SERVICES CONCERNED BY THE SUBSEQUENT DESIGNATION⁷

Check **only one box**.

- (a) **the subsequent designation is made**, in respect of **all** the Contracting Parties designated in item 4, for **all** the goods and services listed in the international registration indicated in item 1; or
- (b) **the subsequent designation is made**, in respect of **all** the Contracting Parties designated in item 4, **only** for those goods and services listed in the continuation sheet (which must be grouped in the appropriate class(es)); or:
- (c) **the subsequent designation is only** for those goods and services listed in the continuation sheet in respect of the Contracting Parties identified in the said continuation sheet; in respect of the other Contracting Parties designated in item 4, the subsequent designation is for all the goods and services listed in the international registration identified in item 1⁸.

6. MISCELLANEOUS INDICATIONS

Only provide these indications or translations if they are **not already recorded** in the International Register; if this is the case, the International Bureau will disregard any new indication or translation provided in item 6 of this form.

- (a) **Indications concerning the holder** (as may be required by certain designated Contracting Parties, such as, for example, the United States of America; **only** provide indications in **either** item (i) **or** in item (ii) but **not in both items**):

- (i) If the holder is a **natural person**, nationality of the holder:

Nationality of the holder:

- (ii) If the holder is a **legal entity**, provide **both** of the following indications:

Legal nature of the legal entity:

State (country) and, where applicable, territorial unit within that State (canton, province, state, etc.), under the law of which the said legal entity has been organized:

⁷ You can use the Madrid Goods and Services Manager (MGS) to find indications accepted by WIPO. In MGS, you can also find acceptance information for selected Contracting Parties. MGS is available at www.wipo.int/mgs.

⁸ Use font "Courier New" or "Times New Roman", size 12 pt., or larger. Use semicolon (;) to separate indications or goods or services listed in a given class. For example:

09 Screens for photoengraving; computers.

35 Advertising; compilation of statistics; commercial information agencies.

- (b) **Indication, for each color, of the principal parts of the mark that are in that color** (as may be required by certain designated Contracting Parties):

- (c) **Translation of the mark** (as may be required by certain designated Contracting Parties; **do not** check the box in item (d) if you provide a translation in this item):

(i) into English:

(ii) into French:

(iii) into Spanish:

- (d) **Check this box if the words contained in the mark have no meaning** (and therefore cannot be translated; **do not** check this box if you have provided a translation in item (c)).

- (e) **Voluntary description of the mark** (any description of the mark by words, including the description contained in the basic application or registration, if you were not required to provide this description in item 9(e)(i) of the international application form MM2):

7. DATE OF THE SUBSEQUENT DESIGNATION⁹

Check **only one box**.

- (a) **this subsequent designation shall take effect after the renewal of the international registration indicated in item 1;**
- (b) **this subsequent designation shall take effect after the recording in the International Register of the following change or cancellation in respect of the international registration indicated in item 1 (specify the change or cancellation):**

⁹ If neither of these boxes is checked, the date of this subsequent designation will, subject to Rule 24(6)(c)(i) of the Regulations under the Protocol, be the date of its receipt by the International Bureau if it has been presented direct to the International Bureau, or, if it has been presented through the intermediary of an Office, the date of receipt by that Office, provided that the said designation has been received by the International Bureau within a period of two months from that date and subject to Rule 24(6)(c)(i) and (d) of the Regulations under the Protocol.

8. 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 or herein appointed):*By signing this form, I declare that I am entitled to sign it under the applicable law.*

Name:

Signature:

9. DATE OF RECEIPT AND DECLARATION BY THE OFFICE OF THE CONTRACTING PARTY OF THE HOLDER PRESENTING THE SUBSEQUENT DESIGNATION

Where the subsequent designation is presented through an Office.

Date of receipt of the subsequent designation by the Office (dd/mm/yyyy)

10. OFFICE PRESENTING THE SUBSEQUENT DESIGNATION

If applicable.

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

FEE CALCULATION SHEET**(a) INSTRUCTIONS TO DEBIT FROM A CURRENT ACCOUNT**

- The International Bureau is hereby instructed to debit the required amount of fees from a current account opened with the International Bureau (if this box is checked, it is not necessary to complete (b)).

Holder of the account:	
Account number:	
Identity of the party giving the instructions:	

(b) AMOUNT OF FEES (see Fee Calculator: www.wipo.int/madrid/en/fees/calculator.jsp)

Basic fee (Swiss francs)	300.-
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Complementary fees:

Number of designations for which complementary fee is applicable	Complementary fee	Total amount of the complementary fees
x	100 Swiss francs	=

Individual fees (Swiss francs)¹⁰:

Designated Contracting Parties	Individual fee	Designated Contracting Parties	Individual fee

Total individual fees	=
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GRAND TOTAL (Swiss francs)	=
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(c) METHOD OF PAYMENT

Identity of the party effecting the payment:	
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Payment received and acknowledged by WIPO	<input type="checkbox"/>	WIPO receipt number	
Payment made to WIPO bank account IBAN No. CH51 0483 5048 7080 8100 0 Crédit Suisse, CH-1211 Geneva 70 Swift/BIC: CRESCHZZ80A	<input type="checkbox"/>	Payment identification	dd/mm/yyyy
Payment made to WIPO postal account (within Europe only) IBAN No. CH03 0900 0000 1200 5000 8 Swift/BIC: POFICHBE	<input type="checkbox"/>	Payment identification	dd/mm/yyyy

¹⁰ Where individual fees have been declared, you will pay these fees instead of the standard fees **except** where the designated Contracting Party and the Contracting Party of the holder are both States bound by the Protocol and the Agreement, in which case, a complementary fee is payable.

CONTINUATION SHEET FOR SEVERAL HOLDERS

No. of

Please, complete a separate continuation sheet for **each holder**.

HOLDER No. of

(a) **Name:**

(b) **Address:**

A large, empty rectangular area with a light blue background, intended for the main content of the continuation sheet. It is bounded by a thin black line.