

Request for changes relating to an association of professional representatives before the European Patent Office

Γ		Name of association
	European Patent Office Dept. 5.3.2.1 Legal Division	Registration number
	80298 Munich	
	GERMANY	Address

I. Request for a change in the composition

We request registration of a change in the composition of the association with effect from the date of receipt of the present request at the EPO or from the following subsequent date

Date

Members to be added¹ (see additional sheet where necessary)

First name(s)	Representative ID number	Signature	Date
	First name(s)	First name(s) Representative ID number	First name(s) Representative ID number Signature Image: Signature Image: Signature Image: Signature Image: Signature Image: Signature <t< td=""></t<>

Members to be deleted¹ (see additional sheet where necessary)

Last name	First name(s)	Representative ID number	Signature	Date

Confirmation by at least one member of the association (see additional sheet where necessary)

Last name	First name(s)	Representative ID number	Signature	Date

¹ This form is only valid for changes relating to an association. If the address in the list of professional representatives before the EPO (see Article 134(1) EPC) should also be changed, a separate request using EPO Form 52301 (Request for registration of changes relating to an entry in the list of professional representatives before the European Patent Office) should be filed.

II. Request for a change of name¹

	We request registration of a change of name of the association with effect from the date of receipt of the present request at the EPO or from the following subsequent date					
	Date					
	The new name is					
\square	Confirmation by at	least one member of the a	ssociation (see additional she	et where necessary)		
Last n	ame	First name(s)	Representative ID number	Signature	Date	

III. Request for a change of address¹

We request registration of a change of address of the association with effect from the date of receipt of the present request at the EPO or from the following subsequent date

 Date

The new address is

\bigtriangledown	Confirmation by at least one member of the association (see additional sheet where necessary)
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Last name	First name(s)	Representative ID number	Signature	Date

IV. Number of annexes (e.g. additional sheet for further members)

¹ This form is only valid for changes relating to an association. If the address in the list of professional representatives before the EPO (see Article 134(1) EPC) should also be changed, a separate request using EPO Form 52301 (Request for registration of changes relating to an entry in the list of professional representatives before the European Patent Office) should be filed.