



Business Services Division
Tre Hargett, Secretary of State
 State of Tennessee

INSTRUCTIONS

**APPLICATION FOR CHANGE OF ADDRESS
 TRADEMARK OR SERVICE MARK**

SUBMISSION OPTIONS

Applications may be filed using one of the following methods:

- **Paper submission:** A blank application may be obtained by going to <http://www.tn.gov/sos/forms/ss-4266.pdf>, by emailing the Secretary of State at TNSOS.ATS@tn.gov, or by calling (615) 741-0531. The application must be hand printed in ink or computer generated and mailed along with the required filing fee to the Secretary of State's office at 6th FL – Snodgrass Tower ATTN: Trademarks, 312 Rosa L. Parks AVE, Nashville, TN 37243.
- **Walk-in:** A blank application may be obtained in person at the Secretary of State Business Services Division located at 6th FL – Snodgrass Tower, 312 Rosa L. Parks AVE, Nashville, TN 37243.

Applications must be accurately completed in their entirety. Cover forms that are inaccurate, incomplete or illegible will be rejected.

APPLICANT INFORMATION

1. **Name of the mark:** Enter the mark's name as given on the original application.
2. **Mark number:** Enter the mark's number as assigned at the time of filing the original application.
3. **The owner of record of the mark is:** Enter the name of the person or entity who currently owns the mark.
4. **The new business address of the owner is:** Enter the complete business address. The address must include a street address or post office box (or both), city, state and zip code.

SIGNATURE AND VERIFICATION

- **By signing the application, the applicant verifies under penalty of perjury that all the statements on the application are true and correct.**
- This application must be signed by the applicant. **Failure to sign the application will result in the application being rejected.**
- Type or Print Name & Title. **Failure to type or print the signature name and title of the signer (if the applicant is a business entity) will result in the application being rejected.**

NO FILING FEE

APPLICATION FOR CHANGE OF ADDRESS
TRADEMARK OR SERVICE MARK

(SS-4266)



Business Services Division
Tre Hargett, Secretary of State
State of Tennessee
312 Rosa L. Parks Ave., 6th Fl.
Nashville, TN 37243
(615) 741-0531

No Filing Fee

For Office Use Only

In compliance with the requirements of T.C.A. § 47-25-507, the undersigned hereby submits a change of address for the owner of a trademark or service mark registered in Tennessee:

1. Name of the mark: _____

2. Mark number: _____

3. The owner of record of the mark is: _____

4. The new business address of the owner is:

Business Address: _____

City: _____ State: _____ Zip Code: _____

I declare under penalty of perjury the foregoing statements are true and correct.

Signature Date

Applicant's Signature

Applicant's Name and Title (printed or typed)

***Note: Pursuant to T.C.A. § 10-7-503 all information on this form is public record.**

Submitter Information: Name: _____ Phone #: (____) _____