

**Interim Designation of Agent to Receive Notification
of Claimed Infringement**

Full Legal Name of Service Provider: Frigid Fluid Co

Alternative Name(s) of Service Provider (including all names under which the service provider is doing business): _____

Address of Service Provider: 11631 W. Grand Ave Northlake, IL 60164

Name of Agent Designated to Receive Notification of Claimed Infringement: Robert Yeazel or Stephen Yeazel

Full Address of Designated Agent to which Notification Should be Sent (a P.O. Box or similar designation is not acceptable except where it is the only address that can be used in the geographic location): 11631 W. Grand Ave, Northlake, IL 60164

Telephone Number of Designated Agent: 708-836-1215

Facsimile Number of Designated Agent: 708-836-1247

Email Address of Designated Agent: ryeazel@frigidfluidco.com
syaezel@frigidfluidco.com

Signature of Officer or Representative of the Designating Service Provider: _____
Date: 11-1-02

Type or Printed Name and Title: Robert Yeazel, President

**Note: This Interim Designation Must be Accompanied by a \$30 Filing Fee
Made Payable to the Register of Copyrights.**

RECEIVED

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