

Interim Designation of Agent to Receive Notification of Claimed Infringement

Full Legal Name of Service Provider: The Lubrizol Corporation

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

Address of Service Provider: 29400 Lakeland Boulevard
Wickliffe, Ohio 44092

Name of Agent Designated to Receive Notification of Claimed Infringement: James S. Baldwin

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): The Lubrizol Corporation, 29400 Lakeland Boulevard, Wickliffe, Ohio
44092

Telephone Number of Designated Agent: (440) 347-1838

Facsimile Number of Designated Agent: (440) 347-1858

Email Address of Designated Agent: JSB@LUBRIZOL.COM

Signature of Representative of the Designating Service Provider: _____
Date: 11-05-02

Typed or Printed Name and Title: James S. Baldwin
Manager, Communication Services

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

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