972 189-3950

2001 UNIFORM BUSINESS REPORT (UBR)

SIGNATURE: V

FILED Apr 03, 2001 8:00 am Secretary of State DOCUMENT # F0000007053 E3 GROUP, INC. 04-03-2001 90106 048 ***150.00 Principal Place of Business Mailing Address 14881 OUPRUM DRIVE, SUITE 900 14881 OUPRUM DRIVE, SUITE 900 000402 DALLAS TX 75240-6789 DALLAS TX 75240-6789 2. Principal Place of Business 3. Mailing Address #900 14881 QUORUM DR 14881 QUORUM DR Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 75-2516050 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name C T CORPORATION SYSTEM Street Address (P.O. Box Number is Not Acceptable) 1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324 City Zip Code 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2001 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 12. 11. CR2E034 (10/00) ☐ Delete TITLE ☐ Addition **PCEO** TITLE NAME NAME EVANS, RANDY STREET ADDRESS STREET ADDRESS 15111 MEANDERING PLACE CITY-ST-ZIP CITY-ST-ZIP Dallas TX 75248 Change Addition TITLE ☐ Delete TITLE ۷T NAME CHILDRESS, JAMES S STREET ADDRESS STREET ADDRESS 2210 CEDAR CIRCLE CITY-ST-ZIP CITY-ST-7IP CARROLLTON TX 75006 ☐ Delete TITLE Change --- Addition TITLE NAME HARRIS, STEPHEN L NAME STREET ADDRESS STREET ADDRESS 6604 GRETCHEN LANE CITY-ST-ZIP CITY-ST-ZIP DALLAS TX 75252 ☐ Delete Change ☐ Addition TITLE TITLE NAME NAME MCCORD, JIM R STREET ADDRESS STREET ADDRESS P.O. BOX 353 CITY-ST-ZIP CITY-ST-ZIP ADDISON TX 75001-0353 TITLE ☐ Delete TITLE ☐ Change ■ Addition LAFVING, BRIAN D STREET ADDRESS STREET ADDRESS 6807 SOUTHPOINT CITY-ST-ZIP CITY-ST-ZIP Dallas TX 75248 TITLE ☐ Delete TITLE Change ☐ Addition NAME MARKS, ROGER T NAME STREET ADDRESS STREET ADDRESS 6643 MARLIN DRIVE CITY-ST-ZIP CITY-ST-7IP PLANO TX 75023 13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under cath; that I am an officer or director of the corporation or the receiver or truefie empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed or on an attachment with an address with all other III among the proposered. changed, or on an attachment with ar address, with all other empowered,

TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR