50322

(Requestor's Name)	
(Address)	
(Address)	
(City/State/Zip/Phone #)	
PICK-UP WAIT MAIL	
(Business Entity Name)	
(Document Number)	
Certified Copies Certificates of Status	
Special Instructions to Filing Officer;	

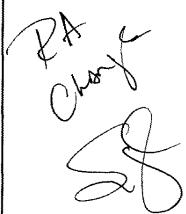
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SECRETANY OF STATE TALLAHASSEE, FLORIDA



LAW OFFICES BIBER O'TOOLE DELANO FOWLER & CLARKSON P.L.

MEMBER ADMITTED IN FLORIDA:

G. KRISTIN DELANO

FIRST CENTRAL TOWER

360 CENTRAL AVENUE, SUITE 1560
ST. PETERSBURG, FLORIDA 33701
TELEPHONE (727) 894-5422 FACSIMILE (727) 821-7788
gkdelano@lawstpete.com
www.lawstpete.com

CONTINENTAL PLAZA BUILDING 2701 TROY CENTER DRIVE, SUITE 400 TROY, MICHIGAN 48084

TELEPHONE (248) 362-2030 FACSIMILE (248) 362-5568

Reply To: St. Petersburg, Florida Office

Via FedEx 792386016139

July 27, 2007

Department of State Division of Corporations Corporate Filings P.O. Box 6327 Tallahassee, FL 32314

To Whom It May Concern::

Please find enclosed herewith Change of Registered Agent forms to be filed for the following entities:

E Group, Inc.	\$ 35.00
Encore Business Solutions, Inc.	\$ 35,00
HHG V, Inc.	\$ 35.00
Mullis Group III, Inc.	\$ 35.00
Mullis Group IV, Inc.	\$ 35.00
Mullis Group V, Inc.	\$ 35.00
Mullis Insurance Agency, Inc.	\$ 35.00
Mullis Payroll Services, Inc.	\$ 35.00
Primecore, Inc.	\$ 35.00
TLR of Bonita, Inc.	\$ 35.00
KAT, LLC	\$ 25.00
MALA Rock, LLC	\$ 25.00
	\$400.00

Also enclosed is check 1856 to cover the expenses. Thank you in advance for your kind attention in handling these for us.

Very truly yours,

Andi Gorton

Enclosures

COVER LETTER

TO:	Amendment Section Division of Corporation	ons			
SUBJE	ECT:	E Group, Inc.			
	·	(Name of C	orporatio	on)	
DOCU	MENT NUMBER:	J03222			
The en	closed Statement of Ch	ange of Registered Office	e/Agent a	and fee are submitted for filing.	
Please	return all corresponden	ce concerning this matter	r to the fo	ollowing:	
	G.	Kristin Delano			
		(Name of Co	ntact Per	son)	
	Bi	oer O'Toole Delano F		Clarkson PL	
		(Firm/Co	ompany)		
	0.0	10 O A O	450	0	
		O Central Avenue, S (Add		<u> </u>	
		(Auu	11033)		
	S	. Petersburg, FL 3370	11		
		(City/State ar		ode)	
For fur	ther information concer	ning this matter, please of	call:		
- 0					
	G. Kristin Delar	=	at (727) 894-5422 rea Code & Daytime Telephone Numbe	٠,-
	(Name of Cont	act Person)	(A	rea Code & Daytime Telephone Numbe	E)
Enclose	ed is a \$35.00 check ma	de payable to the Depart	tment of	State.	
	Maili	na Addraec		Street Address	
	Amer	ng Address: ndment Section		Street Address: Amendment Section	
		ion of Corporations		Division of Corporations	
		3ox 6327		Clifton Building	
	Talla	nassee, FL 32314		2661 Executive Center Circle	

Tallahassee, FL 32301

TO:

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

		ctions 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this I for a corporation organized under the laws of the State of Florida
		registered office or registered agent, or both, in the State of Florida.
1. The name of th	e corporation:	E Group, Inc.
		8950 Dr ML King St N. #190
		St. Petersburg, FL 33702
3. The mailing ad	ldress (if differ	ent):
4. Date of incorp	oration/qualific	cation: _03/11/1986
5. The name and Florida Depart		of the current registered agent and registered office on file with the
<u>-</u>		Edgar O Rawls
		8950 Dr ML King St N., #190
		St. Petersburg, FL 33702
6. The name and (if changed):	street address o	of the new registered agent (if changed) and /or registered office;
		G. Kristin Delano
		360 Central Ave., Ste 1560
		(P.O. Box NOT acceptable) St. Petersburg, FL 33701
The street address as changed will l	ss of its registe be identical.	ered office and the street address of the business office of its registered agent,
Such change was authorized by the	s authorized by board, or the	resolution duly adopted by its board of directors or by an officer so corporation has been notified in writing of the change.
1 Cach	lee	Kathleen D. Rawls, President (Printed or typed name and title)
` •		nt as registered agent and agree to act in this capacity. the provisions of all statutes relative to the proper and complete performance with and accept the obligation of my position as registered agent. Or, if this to reflect a change in the registered office address, I hereby confirm that the in writing of this change.
کے کے	(1)	7/2/07
(Sign	nature of Registered	Agent) (Date)
If signing on beh	alf of an entity	y:
(Ty	ped or Printed Nam	ic)

* * * FILING FEE: \$35.00 * * *