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12/9/01

FedEx Tracking Number

822724422524

Mr's Bruce KEMAN Phone 305 495 7531

Company PROSYS INFORMATION SYSTEMS INC

Address 6410 ATLANTIC BLVD STE 165

Dept./Floor/Suite/Room

WDCROSS

State GA ZIP 30071

Office Use Only

CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

1. (Corporation Name) (Document #)

2. (Corporation Name) (Document #)

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3. (Corporation Name) (Document #)

4. (Corporation Name) (Document #)

☐ Walk in

☐ Pick up time

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☐ Mail out

☐ Will wait

☐ Photocopy

☐ Certificate of Status

NEW FILINGS

- ☐ Profit
- ☐ Not for Profit
- ☐ Limited Liability
- ☐ Domestication
- ☐ Other

AMENDMENTS

- ☐ Amendment
- ☐ Resignation of R.A., Officer/Director
- ☐ Change of Registered Agent
- ☐ Dissolution/Withdrawal
- ☐ Merger

OTHER FILINGS

- ☐ Annual Report
- ☐ Fictitious Name

REGISTRATION/QUALIFICATION

- ☐ Foreign
- ☐ Limited Partnership
- ☐ Reinstatement
- ☐ Trademark
- ☐ Other

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
01 NOV -2 AM 10:03

BOIRA Change
Examiner's Initials

10

11.2.01



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State

October 18, 2001

BRUCE KEENAN
PROSYS INFORMATION SYSTEMS INC
6410 ATLANTIC BLVD - STE 165
NORCROSS, GA 30071

SUBJECT: HIMALAYAN CHILDREN'S CHARITIES, INC.
Ref. Number: N00000001830

RECEIVED
01 NOV -2 AM 9:36
DIVISION OF CORPORATIONS

We have received your document for HIMALAYAN CHILDREN'S CHARITIES, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing a computer printout which reflects the registered agent and registered office now on file with this office. Please amend your document accordingly.

The designation of the registered agent must be at a Florida street address.

We regret that we were unable to contact you by phone. Please return the corrected document with a letter providing us with a telephone number where you can be reached during working hours.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Irene Albritton
Document Specialist

Letter Number: 101A00057567

*I have made the
connections. - Please
may call me @ 305-495-
7531 between 8 am and 8 pm.
Thank you,
Bub*

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

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, the undersigned corporation organized under the laws of the State of FLORIDA submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: HIMALAYAN CHILDREN'S CHARITIES, INC.

2. The mailing address of the corporation: 12983 SW 132ND COURT
MIAMI FL 33186

3. Date of incorporation/qualification: MARCH 21, 2000 Document number: N 000 000 1830

4. The name and address of the current registered agent and registered office:

Michael B. Walker, ESQ.

777 BRICKELL AVE #900

MIAMI FL 33131

5. The name and address of the new registered agent (if changed) and /or registered office (if changed):

BRUCE KEENAN

7928 WEST DRIVE #509

N. BAY VILLAGE FL 33141

305 495-7531

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
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The street address of its registered office and the street address of the business office of its registered agent, as changed, will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board.

Bruce Keenan
(Signature of an officer, chairman or vice chairman of the board)

10/9/01
(Date)

BRUCE KEENAN PRESIDENT
(Printed or typed name and title)

Having been named as registered agent and to accept service of process for the above stated corporation, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent.

Bruce Keenan
(Signature of Registered Agent)

10/9/01
(Date)

If signing on behalf of an entity:

(Typed or Printed Name)

(Capacity)

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