

G03833

**Florida Department of State
Division of Corporations
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REGISTERED AGENT CHANGE

SPECTRUM SCIENCES & SOFTWARE, INC.

Certificate of Status	0
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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, this statement of change is submitted for a corporation organized under the laws of the State of Florida in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: SPECTRUM SCIENCES & SOFTWARE, INC.
2. The principal office address: 91 Hill Avenue NW, Fort Walton Beach, Florida 32548
3. The mailing address (if different): SPECTRUM SCIENCES & SOFTWARE HOLDINGS CORP.
3130 Fairview Park Drive, Suite 400, Falls Church, Virginia 22042
4. Date of incorporation/qualification: 10/08/1982 Document number: G03833

5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:

William H. Ham

103 Teresa Ct.

Niceville, Florida 32578

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

CT Corporation System

c/o CT Corporation System, 1200 South Pine Island Road

(P.O. Box NOT acceptable)

Plantation, Florida 33324

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, or the corporation has been notified in writing of the change.

By: CT Corporation System

(Signature of an officer or director)

Judith B. Argeo

Asst. Secretary & V. President

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. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.

Connie Bryan

(Signature of Registered Agent)

02/10/2005

(Date)

If signing on behalf of an entity:

CONNIE BRYAN

SPECIAL ASSISTANT SECRETARY

(Typed or Printed Name)

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

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

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