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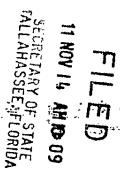
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D. BRUCE

NOV 16 2011

EXAMINER

COVER LETTER

Division of Co	orporations '			
SUBJECT:	Global Trans	fer Technology, LL	.C	
SUBJECT.		ited Liability Company		-
The enclosed Articles o	f Amendment and fee(s) are su	bmitted for filing.		
Please return all corresp	oondence concerning this matte	r to the following:		
		Steve Shafer		_
		Name of Person		
	Global	Transfer Technology	, LLC	
		Firm/Company		
	4	20 Brightwater Dr SE		
		Address ·		
		Palm Bay, FL 32909		ALL A
		City/State and Zip Code		
	E-mail address: (sshafer2@cfl.rr.com to be used for future annual rep	ort notification)	OV I L MI ETARY OF HASSEE, F
For further information	concerning this matter, please of	call:		MB 09 OF STATE OF CORID,
	Steve Shafer	at (321)	704-2142	6 0 1 0 1 0 1 0 1 0 1 0
Name	of Person		Daytime Telephone Numb	per
Enclosed is a check for t	the following amount:			
\$25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is en	Certific nclosed) Certific	filing Fee, cate of Status & ed Copy onal copy is enclosed)
MAII	ING ADDRESS:	STREET/C	OURIER ADDRESS:	

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

TO:

Registration Section

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Global Transfer	Techology, LLC				
(Name of the Limited Liability Compa (A Florida Limited	iny as it now appears of Liability Company)	n our records	<u>.</u>)		
The Articles of Organization for this Limited Liability Company	were filed on	3/25/2010	<u> </u>	and as	signed
Florida document numberL10000032914					
This amendment is submitted to amend the following:					
A. If amending name, enter the new name of the limited liab	oility company here:				
Spectrum Based	Solutions, LLC				
The new name must be distinguishable and end with the words "Lim "L.L.C."	ited Liability Company,	" the designation	on "LLC	" or the	abbreviation
Enter new principal offices address, if applicable:	420 Brightwater	Dr SE	₽ŏ		
(Principal office address MUST BE A STREET ADDRESS)	Palm Bay, FL 32	2909	A A A A A	<u>ā</u>	
			ASS	=	
			Y OF	>	Ш
Enter new mailing address, if applicable:	420 Brightwater	Dr SE)F STAT	₹ -	
(Mailing address MAY BE A POST OFFICE BOX)	Palm Bay, FL		ZA BA	<u>Q</u>	
	32909		> ·		
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address her		records, ent	ter the	name	of the new
New Registered Office Address:	Enter 1	Florida street	address	,	
		, Florida	9		
	City	, 1 101101		ip Cod	le e

New Registered Agent's Signature, if changing Registered Agent:

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 obligations of my position as registered agent as provided for in Chapter 608, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

If amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = M MGRM =	anager Managing Member		
<u>Title</u>	Name	Address	Type of Action
			Add Remove
			Add Remove
			Add Remove
			Add Remove
			Add Remove
			Add Remove
D. If amen	ding any other information, enter char	nge(s) here: (Attach additional sheets, if necessor	nry.)
			TALLAHA
	July 20 OCT 4, 2	2011 . Q	SEE F
	Signature of a memb	er or authorized representative of a member	FLORIDA FLORIDA
		Steven L. Shafer	

Page 2 of 2

Filing Fee: \$25.00