P0900006995

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



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COVER LETTER

` TO: Amendment Section Division of Corporations

SUBJECT: Metoer Technology Solutions, Inc				
•	Name of Corporation)			
DOCUMENT NUMBER:				
The enclosed Articles of Correction and fe	ee are submitted for filing.			
Please return all correspondence concerning	ng this matter to the following:			
Gnana Shaker Munirathnam				
(Name of Contact Person)				
Metoer Technology Solutions, In	nc			
(Firm/Company)				
20020 Tamiami Ave				
(Address)				
Tampa, FL 33647				
(City/State and Zip Code)				
For further information concerning this m	atter, please call:			
Shaker	at (813 451-1600 (Area Code & Daytime Telephone Number)			
(Name of Contact Person)	(Area Code & Daytime Telephone Number)			
Enclosed is a check for the following amo	ount:			
[7] \$35.00 Filing Fee	\$43.75 Filing Fee & Certificate of Status			
\$43.75 Filing Fee & Certified Copy	\$52.50 Filing Fee, Certificate of Status & Certified Copy			
Mailing Address:	Street Address:			
Amendment Section	Amendment Section			
Division of Corporations	Division of Corporations			
P.O. Box 6327	Clifton Building 2661 Executive Center Circle			
Tallahassee, FL 32314	Tallahassee, FL 32301			

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February 12, 2009

GNANA SHAKER MUNIRATHNAM 20020 TAMIAMI AVE TAMPA, FL 33647

SUBJECT: METOER TECHNOLOGY SOLUTIONS, INC.

Ref. Number: P09000006995

We have received your document for METOER TECHNOLOGY SOLUTIONS, 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):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

Adding "of Florida" or "Florida" to the end of a name is not acceptable.

The document number of the name conflict is L03000015963.

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) 245-6916.

Letter Number: 009A00005118

Carol Mustain Regulatory Specialist II

Division of Corporations - P.O. BOX 6327 -Tallahassee, Florida 32314

ARTICLES OF CORRECTION

for

Name of Corporation as currently filed with the Florida Dept. of State Document Number (if known) Pursuant to the provisions of Section 607.0124 or 617.0124, Florida Statutes, this corporates Articles of Correction within 30 days of the file date of the document being correct	oration cted.	files
Pursuant to the provisions of Section 607.0124 or 617.0124. Florida Statutes, this corporate	oration cted.	files
Pursuant to the provisions of Section 607.0124 or 617.0124. Florida Statutes, this corporate	oration cted.	files
Pursuant to the provisions of Section 607.0124 or 617.0124, Florida Statutes, this corporates Articles of Correction within 30 days of the file date of the document being correction.	oration cted.	files
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These articles of correction correct Name of the corporation		
filed with the Department of State on January 23rd, 2009 (File Date of Document)	,	
Specify the inaccuracy, incorrect statement, or defect: I want to change the corporation name from Metoer Technology Solo	utions	: Inc
to "GSM, Inc"		<u>, 1110</u>
to COW, IIIC	70	
	F	-50
	全台	\$
	SS	20
	M _C	200
		<u> </u>
Correct the inaccuracy, incorrect statement, or defect:		, ,
New name = GSM inc.		ယ
New name = GSM SOFTWARE TECHNOLOGIES	Inc	•
(Signature of a director, president or other officer - if directors or officers have not been selected, by an incorporator - if in the hands of the receiver, trustee, or other court appointed fiduciary, by that fiduciary.)		
Grana Shaker Munirathnam Preside. (Typed or printed name of person signing) (Title of person		

Filing Fee: \$35.00