AMENDMENT TO
FINANCIAL ASSISTANCE AWARD

CFDA NO. AND NAME
11.549 - State and Local Implementation Grant Program

PROJECT TITLE
Louisiana State Broadband Planning Grant

RECIPIENT NAME
Louisiana Office of State Police

AMENDMENT NUMBER
3

STREET ADDRESS
7719 Independence Blvd.

EFFECTIVE DATE
Oct 14, 2015

CITY, STATE ZIP
Baton Rouge, LA 70806-6405

COSTS ARE REVISED AS FOLLOWS:

<table>
<thead>
<tr>
<th></th>
<th>PREVIOUS ESTIMATED COST</th>
<th>ADD</th>
<th>DEDUCT</th>
<th>TOTAL ESTIMATED COST</th>
</tr>
</thead>
<tbody>
<tr>
<td>FEDERAL SHARE OF COST</td>
<td>$1,928,721.00</td>
<td>$0.00</td>
<td>$0.00</td>
<td>$1,928,721.00</td>
</tr>
<tr>
<td>RECIPIENT SHARE OF COST</td>
<td>$482,180.00</td>
<td>$0.00</td>
<td>$0.00</td>
<td>$482,180.00</td>
</tr>
<tr>
<td>TOTAL ESTIMATED COST</td>
<td>$2,410,901.00</td>
<td>$0.00</td>
<td>$0.00</td>
<td>$2,410,901.00</td>
</tr>
</tbody>
</table>

REASON(S) FOR AMENDMENT
This grant is hereby amended to: (1) acknowledge the receipt and approval of the Phase 2 budget modification submitted September 23, 2015, (2) release the Phase 2 reserve of $964,360 (50% of the federal funds), which was previously established in Special Award Condition #6; and (3) updates Grants Officer information listed under Special Award Condition No. 04.

ALL PREVIOUS TERMS AND CONDITIONS REMAIN IN EFFECT.

This Amendment Document (Form CD-451) signed by the Grants Officer constitutes an Amendment of the above-referenced Award, which may include an obligation of Federal funding. By signing this Form CD-451, the Recipient agrees to comply with the Amendment provisions checked below and attached, as well as previous provisions incorporated into the Award. If not signed and returned without modification by the Recipient within 30 days of receipt, the Grants Officer may unilaterally withdraw this Amendment offer and de-obligate any associated funds.

X SPECIAL AWARD CONDITIONS

X LINE ITEM BUDGET

OTHER(S)

SIGNATURE OF DEPARTMENT OF COMMERCE GRANTS OFFICER

Husai Rahman

DATE
10/9/2015

TYPED NAME, TYPED TITLE, AND SIGNATURE OF AUTHORIZED RECIPIENT OFFICIAL

Michael Edmonson, Deputy Secretary/Superintendent

DATE
10/29/2015