



F97000006375

236 East 6th Avenue . Tallahassee, Florida 32303

P.O. Box 37066 (32315-7066) ~ (850) 222-2666 or (800) 969-1666 . Fax (850) 222-1666

WALK IN

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12/5/00



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Amend.

1.) Tier Technologies, Inc.

(CORPORATE NAME & DOCUMENT #)

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-12/05/00--01036--004

*****35.00 *****35.00

2.)
(CORPORATE NAME & DOCUMENT #)

3.)
(CORPORATE NAME & DOCUMENT #)

4.)
(CORPORATE NAME & DOCUMENT #)

5.)
(CORPORATE NAME & DOCUMENT #)

FILED
00 DEC -5 AM 11:49
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Q. DOULLETTE DEC 05 2000

SPECIAL INSTRUCTIONS

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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,
the undersigned corporation organized under the laws of the State of CALIFORNIA
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 is: TIER TECHNOLOGIES, INC.
2. The mailing address of the corporation is: 1350 TREAT BLVD., SUITE 250
WALNUT CREEK, CA 94596
3. Date of incorporation/qualification: 12/3/97 Document number: F97000006375
4. The name and address of the current registered agent and office:

PARACORP INCORPORATED
1116D THOMASVILLE ROAD
TALLAHASSEE, FL 32303

5. The name and address of the new registered agent and office: (P. O. Box Not Acceptable)

PARACORP INCORPORATED
236 EAST 6TH AVENUE
TALLAHASSEE, FL 32303

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.

Laura B. DePole

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

10/12/00

(Date)

LAURA B. DEPOLE / C.S.T.

(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.

[Signature]

(Signature of Registered Agent)

10/12/00

(Date)

If signing on behalf of an entity:

BARBARA GEIGER

(Typed or Printed Name)

SECRETARY OF PARACORP INCORPORATED

(Capacity)

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