## ACCOUNT NO.

REFERENCE

841725

7160010

AUTHORIZATION

COST LIMIT

ORDER DATE: October 8, 2001

ORDER TIME :

10:27 AM

ORDER NO. : 841725-180

CUSTOMER NO: 7160010

CUSTOMER: Ms. Pattie .. Manning

Quadramed Corporation

22 Pelican Way

San Rafael, CA 94903

100004629821--1

## CHANGE OF AGENT

NAME:

QUADRAMED OPERATING

CORPORATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY \_ PLAIN STAMPED COPY

CONTACT PERSON: Angie Glisar

TALLAHASSEE, FLORIDA DIVISION OF CORPORATIONS DEPRHIMENT OF STATE

35 :11 MA 01 138 FO

SECEINED

## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

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 :	
QuadraMed Operating Corporation  2. The mailing address of the corporation: 22 Pelican Way, San Rafael, CA 94901		
4. The name a	and address of the current registered agent and	l office:
	Nationscorp Registered Agents,	Inc. $\frac{1}{2}$ 2
	526 E. Park Avenue	EC 8 T
	Tallahassee, FL32301	ASA T
5. The name a	and address of the new registered agent (if cha (P. O. Box <b>Not</b> Acce	
	Corporation Service Company	
	1201 Hays Street	<b>53</b>
	Tallahassee, FL 32301	
	dress of its registered office and the street address, will be identical.	
Such <b>change</b> authorized by	was authorized by resolution duly adopted by	y its board of directors or by an officer so
14mm	nut (1)	09-10-01
(Signatu	re of an officer, chairman of vice chairman of the board)	(Date)
	Lanza, Exec. VP & Corp. Secretary (Printed or typed name and title)	
regisiereu agi	named as registered agent and to accept ser I hereby accept the appointment as registered the to comply with the provisions of all statute of my duties, and I am familiar with and acc ent.	vice of process for the above stated d agent and agree to act in this capacity. s relative to the proper and complete ept the obligation of my position as
Corporation	Service Company .  (Signature of Registered Agent)	10-9-01 (Date)
f signing on bel	half of an entity:	
Bobbie Hall		Assistant Vice President
	(Typed or Printed Name)	(Capacity)

CR2E045(9/00)

DIVISION OF CORPORATIONS

P.O. Box 6327

TALLAHASSEE, FL 32314