

Secretary of State - Corporation Division - 255 Capitol St. NE, Suite 151 - Salem, OR 97310-1327 - sos.oregon.gov/business - Phone: (503) 986-2200

FILED

MAY 16 2018

REGISTRY NUMBER: 179712-92

OREGON

NEGISTRY MUNIBER.				OREGON SECRETARY OF STATE		
In accordance with Oregon Revised Statute 192.410-192.490, the information on this application is public record. We must release this information to all parties upon request and it will be posted on our website.					For office use only	
	se Type or Print Legibly in Blac					
1)	ENTITY NAME: Sabin Community Association					
2)	STATE THE ARTICLE NUMBER(s): and set forth the article(s) as it is amended to read. (Attach a separate sheet if necessary.)					
	Article 7. The corporation will have members.					
						
3)	THE AMENDMENT WAS ADOPT	red On: April 9, 2018	}			
(If more than one amendment was adopted, identify the date of adoption of each amendment.)						
4)	CHECK THE APPROPRIATE STATEMENT:				1	
	X Membership approval was not required. The amendment(s) was approved by a sufficient vote of the board of directors or incorporators.				or incorporators.	
	☐ Membership approval was required.				į	
	The membership vote was as follows:					
	Class(es) entitled to vote	Number of members entitled to vote	Number of votes entitled to be cast	Number of votes cast FOR	Number of votes cast AGAINST	
					:	
5)	I declare as an authorized sign	ECUTION: (Must be signed by at least one officer or director.) Seclare as an authorized signer, under penalty of perjury, that this document does not fraudulently conceal, obscure, alter, or otherwise misrepresent the nitity of any person including officers, directors, employees, members, managers or agents. This filing has been examined by me and is, to the best of moving and belief, true, correct and complete. Making false statements in this document is against the law and may be penalized by fines, imprisonment ooth.				
	Signature: Print		d Name:	Title:	1	
	Rachel	Rachel Lee		Secretary		
					! !	

CONTACT NAME: (To resolve questions with this filing.)

Rachel Lee

PHONE NUMBER: (include area code.)

(503) 294-9403

FEES

Required Processing Fee \$50

No Fee for Nonprofit Type Change.

SABIN COMMUNITY ASSOCIATION

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