

This Instrument Prepared By:
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Suite 101
West Palm Beach, FL 33409

Jul-29-1999 09:05am 99-309596
ORB 11262 Pg 123
DOROTHY H. WILKEN, CLERK PB COUNTY, FL
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**AMENDMENT TO THE DECLARATION
OF CONDOMINIUM AND BY-LAWS OF
SALISBURY D CONDOMINIUM**

As Recorded in Official Records Book 1734, Page 1702
Public Records of Palm Beach County, Florida:

As used herein (unless substantially reworded) the following shall apply:

- A. Words in the text which are lined through with hyphens indicate deletions from the present text.
- B. Words in the text which are underlined indicate additions to the present text.
- C. Whenever an ellipsis (. . .) appears in the text this indicates that this portion of the present text remains intact to the point where the next typewritten material appears.

We hereby certify that the 1999 UCO Model Documents, Master Amendment recorded in Official Record Book 11019, Page 728, Public Records of Palm Beach County, Florida, which adopts the Master Declaration and By-Laws as recorded in Official Record Book 11019, Page 755, Public Records of Palm Beach County, Florida, were approved by in excess of 75% vote of the Membership at a duly called meeting on DECEMBER 9, 1999, 1999, to include the following inserts to the Master Amendment and Declaration:

- 1. The Association: (choose one) ☐ shall ☐ shall not be incorporated.
- 2. There is no "Pool Area" as described in Articles XIV and XIX of the Master Declaration
- 3. No Exhibit.

Salisbury D Condominium Association, Inc.

By: Robert Hoffman
President

Attest: Chare Banks
Secretary

STATE OF FLORIDA)
COUNTY OF PALM BEACH)

The foregoing instrument was acknowledged before me this 22nd day of JULY, 1999, by ROBERT HOFFMAN President, and CHARE BANKS Secretary. Both are personally known to me and [] did or [x] did not take an oath. The President (please check one of the following) [x] is personally known to me or [] has produced _____ (type of identification) as identification and (please check one of the following) [] did or [x] did not take an oath; the Secretary (please check one of the following) [x] is personally known to me or [] has produced _____ (type of identification) as identification and (please check one of the following) [] did or [x] did not take an oath.

Robert Fogelman
Notary Public

Printed Notary Name

My Commission Expires: 7-22-01

