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

Jul-09-1999 08:25am 99-279019
ORB 11221 Pg 590
DOROTHY H. WILKEN, CLERK PB COUNTY, FL

AMENDMENT TO THE DECLARATION OF CONDOMINIUM AND BY-LAWS OF SOMERSET C CONDOMINIUM

As Recorded in Official Records Book 2088, Page 1378
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 MARCH 20, 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. See attached Exhibit. - NONE

Somerset C Condominium Association, Inc.

By: Frances Mruczkowski
President

Attest: Marcel Hernick
~~Secretary~~ DIRECTOR

STATE OF FLORIDA)
COUNTY OF PALM BEACH)

The foregoing instrument was acknowledged before me this 19th day of MAY, 1999, by FRANCES MRUCZKOWSKI President, and MARCEL HERNICK DIRECTOR ~~Secretary~~. Both are personally know to me and [ ] did or [✓] did not take an oath. The President (please check one of the following) [✓] ~~is~~ personally known to me or [ ] has produced _____ (type of identification) as identification and (please check one of the following) [ ] did or [✓] did not take an oath; the DIRECTOR ~~Secretary~~ (please check one of the following) [✓] is personally known to me or [ ] has produced _____ (type of identification) as identification and (please check one of the following) [ ] did or [✓] did not take an oath.

Robert Fogelman
Notary Public

ROBERT FOGELMAN
Printed Notary Name

My Commission Expires: 7-22-01

ROBERT FOGELMAN
MY COMMISSION # CC 565933
EXPIRES: July 22, 2001
Bonded Thru Notary Public Underwriters

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NOT A CERTIFIED COPY