STATE OF ALABAMA

DOMESTIC NON-PROFIT CORPORATION

ARTICLES OF AMENDMENT TO ARTICLES OF INCORPORATION GUIDELINES

Instructions (PLEASE TYPE)

FILE THE ORIGINAL AND TWO COPIES IN THE COUNTY WHERE THE ORIGINAL ARTICLES OF INCORPORATION ARE FILED. IF THE AMENDMENT CHANGES THE NAME, THE SECRETARY OF STATE'S FEE IS \$10. OTHERWISE, THERE IS NO FEE FOR FILING A NON-PROFIT AMENDMENT. THE PROBATE JUDGE'S MINIMUM FEE FOR FILING AN AMENDMENT IS \$10.

Pursuant to the provisions of the Alabama Nonprofit Corporation Act, the undersigned hereby adopts the following Articles of Amendment.

Article I	The name of the corporation: Liberty Square Homeowners Association		
Article II	The following amendment was adopted: In the Declaration of Protective Covenants of Liberty Square Subdivision, change Article VI, Section 11 to read "The Board or its designee may approve the installation of radio antennas and small satellite dishes that do not protrude above the highest point of the roof line of the residence located on the lot and are not installed on the front face of the residence. The architectural control committee must first approve the style, size, and location of said satellite dish."		
Article III	The date of the meeting of the members where the amendment was adopted, a quorum was present, and the amendment received at least two-thirds of the votes entitled to be cast: 6 November 2008		
Article IV	If there was no meeting, attach a statement that such a signed by all members entitled to vote.	If there was no meeting, attach a statement that such amendment was adopted by written consent and signed by all members entitled to vote.	
Article V	If there are no members or no members are entitled to vote, attach a statement indicating this fact, the date of the Board of Directors meeting at which the amendment was adopted, and that the amendment was adopted by the vote of a majority of the directors in office.		
Date: 20 Ja) January 2009		
Dutc.	Signature o	f President or Vice President	
DIAIE.	Nabalila	f Secretary or Assistant Secretary	
County: Ma	Madison County		
B EFO Shawn Wils	FORE ME THE UNDERSIGNED AUTHORITY IN AND FOR SAII	COUNTY AND STATE, PERSONALLY APPEARED E FIRST DULY SWORN, DOTH DEPOSE AND SAY THAT HE	
SHE IS THE Pres		·	
	N, AND THAT THE FOREGOING STATEMENTS CONTAINED IN THIS AM	,	
	SIGNATURE (OF OFFICER ABOVE	
Subsc	BSCRIBED AND SWORN TO BEFORE ME ON THIS THE DAY	OF, IN WITNESS	
WHEREOF I HE	HERETO SUBSCRIBE MY NAME AND AFFIX THE SEAL OF MY OFFICE.		
	SIGNATURE O	F Notary	
	My commiss	ION EXPIRES	