



Phone: (503) 986-2200
Fax: (503) 378-4381

Articles of Amendment—Business/Professional/Nonprofit

Secretary of State
Corporation Division
255 Capitol St. NE, Suite 151
Salem, OR 97310-1327
FilingInOregon.com

Check the appropriate box below:
 BUSINESS/PROFESSIONAL CORPORATION
(Complete only 1, 2, 3, 4, 6, 7)
 NONPROFIT CORPORATION
(Complete only 1, 2, 3, 5, 6, 7)

FILED

AUG - 7 2009

REGISTRY NUMBER: **368729-92**

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

Please Type or Print Legibly in Black Ink.

1) ENTITY NAME: **CENTER NEIGHBORHOOD 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 I NAME OF ORGANIZATION:

THE NAME OF THE ORGANIZATION SHALL BE NORTH TABOR

NEIGHBORHOOD ASSOCIATION

3) THE AMENDMENT WAS ADOPTED ON: **21 OCTOBER, 2008**

(If more than one amendment was adopted, identify the date of adoption of each amendment.)

BUSINESS/PROFESSIONAL CORPORATION ONLY

4) CHECK THE APPROPRIATE STATEMENT

Shareholder action was required to adopt the amendment(s). The vote was as follows:

Class or series of shares	Number of shares outstanding	Number of votes entitled to be cast	Number of votes cast FOR	Number of votes cast AGAINST

Shareholder action was not required to adopt the amendment(s). The amendment(s) was adopted by the board of directors without shareholder action.

The corporation has not issued any shares of stock. Shareholder action was not required to adopt the amendment(s). The amendment(s) was adopted by the incorporators or by the board of directors.

NONPROFIT CORPORATION ONLY

5) CHECK THE APPROPRIATE STATEMENT

Membership approval was not required. The amendment(s) was approved by a sufficient vote of the board of directors or incorporators.

Membership approval was required. 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
Member	All	48	37	11

6) EXECUTION

Signature

Printed Name

Title

[Handwritten Signature]

~~Joe Recker~~ Joe Recker

~~Co-Chair~~ PRESIDENT

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

Joe Recker

NORTH TABOR NEIGHBORHOOD ASSOCIATION



36872992-11128516

AMDART

Please make check payable to "Corporation Division."

NOTE:

Fees may be paid with VISA or MasterCard. The card number and expiration date should be submitted on a separate sheet for your protection.

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~~(503) 544-3325~~ 533-9393
08-05-09 54 5 \$50



Phone: (503) 986-2200
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Articles of Incorporation—Nonprofit

Secretary of State
Corporation Division
255 Capitol St. NE, Suite 151
Salem, OR 97310-1327
FilingInOregon.com

FILED

JUL 11 2006

OREGON
SECRETARY OF STATE

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Please Type or Print Legibly in Black Ink. Attach Additional Sheet if Necessary.

1) NAME: Center Neighborhood Association

2) REGISTERED AGENT

Robert G. Jordan

3) REGISTERED AGENT'S PUBLICLY AVAILABLE ADDRESS (Must be an Oregon Street Address, which is identical to the registered agent's business office. Must include city, state, zip; No PO boxes.)

302 NE 57th Ave
Portland, OR 97213

4) ADDRESS FOR MAILING NOTICES

302 NE 57th Ave
Portland, OR 97213

5) OPTIONAL PROVISIONS (Attach a separate sheet.)

6) TYPE OF CORPORATION (Select only one)

Public Benefit Mutual Benefit Religious

7) WILL THE CORPORATION HAVE MEMBERS? YES NO
ORS 65.001(28)

(a) "Member" means any person or persons entitled, pursuant to a domestic or foreign corporation's articles or bylaws, without regard to what a person is called in the articles or bylaws, to vote on more than one occasion for the election of a director or directors.
(b) A person is not a member by virtue of any of the following rights the person has:
(A) As a delegate;
(B) To designate or appoint a director or directors;
(C) As a director; or
(D) As a holder of an evidence of indebtedness issued or to be issued by the corporation.
(c) Notwithstanding the provisions of paragraph (a) of this subsection, a person is not a member if the person's membership rights have been eliminated as provided in ORS 65.164 or 65.167.

8) DISTRIBUTION OF ASSETS UPON DISSOLUTION

Southeast Uplift
3534 SE Main St
Portland, OR 97214

9) INCORPORATORS (List names and addresses of each incorporator. Attach a separate sheet if necessary.)

Robert G. Jordan 302 NE 57th Portland OR 97213

10) EXECUTION (All incorporators must sign. Attach a separate sheet if necessary.)

Signature

Robert G. Jordan

Printed Name

Robert G. Jordan

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

Robert G. Jordan

DAYTIME PHONE NUMBER (Includes area code.)

(503) 234-6592

FEES

Required Processing Fee \$50
Confirmation Copy (Optional) \$0
Processing Fees are nonrefundable.
Please make check payable to
"Corporation Division."

NOTE:

Fees may be paid with VISA or MasterCard. The card number and expiration date should be submitted on a separate sheet for your protection.



7/11
KH