



Secretary of State - Corporation Division - 255 Capitol St. NE, Suite 151 - Salem, OR 97310-1327 - http://www.FlanginOregon.com - Phone: (503) 988-2200

Re	GISTRY NUMBER: 12	0633-	19			
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						
Please Type or Print Legibly in Black Ink.						
1)	HTITY NAME: Technical Assistance for Community Services					
2)	STATE THE ARTICLE NUMBER(s): and set forth the article(s) as it is amended to read. (Altach a separate sheet if necessary.) I. The name of this corporation is Nonprofit Association of Oregon.					
	IX. (additional article) The corporation shall have members.					
3)	3) THE AMENDMENT WAS ADOPTED ON: March 15, 2010					
	(If more than one emendment was ac	dopled, identify the date of adoptic	on of each emendment)			
4)	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	
	EXECUTION: (Must be signed by at least one officer or director.) By my signature, I declare as an authorized authority, that this filing has been examined by me and is, to the best of my knowledge and belief, true, correct, and complete. Making false statements in this document is against the law and may be penalized by fines, imprisonment or both.					
	Signature:	Printed	d Name:	Title:		
	Jall_	Kat	hl Jaworski	Chairper	son	

CONTACT NAME: (To resolve questions with this filing.)	FEES Required Processing Fee \$50		
PHONE NUMBER: (Include area code.)	Confirmation Copy (Optional) \$5		
503-295-5868	Ho Fee for Nooprofil Type Change. No Fee for PresidentiSecretary Change.		
303-240-0000	Processing Fees are nonvehindable. Please make check payable to 'Compretion Division.'		