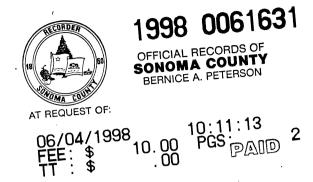
RECORDED AT THE REQUEST OF:

WHEN RECORDED MAIL TO:

QUAIL RUN HOMEOWNERS ASSOC. 6637 OAKMONT DRIVE, SUITE B SANTA ROSA, CA 95409



Space Above This Line For Recorder's Use

AMENDMENT TO OAKMONT VILLAGE DECLARATION NO. 49 OF PROTECTIVE RESTRICTIONS

This is an amendment to those certain protective restrictions entitled <u>"OAKMONT VILLAGE DECLARATION NO.49</u> recorded in the Official Records of Sonoma County on <u>APRIL 1, 1996</u>, Serial <u>#96-0028452</u>.

The property subject to said Declaration and this amendment is particularly described as follows:

All that certain real property situated in the City of Santa Rosa, County of Sonoma, State of California, as shown on the maps ENTITLED, "OAKMONT NO. 19"

Book 542 of Maps, Pages 40-42 in the office of the Recorder of the County of Sonoma, State of California.

It is hereby approved that Article XIII of the OAKMONT VILLAGE DECLARATION NO. 10 OF PROTECTIVE RESTRICTIONS is hereby amended to include the following additional Section:

<u>Section 4. Easements for Air Conditioning Units:</u> There is specifically reserved an easement or easements to allow for a minimal encroachment of air conditioning units and accompanying apparatus along, over, upon, under and into the common area adjacent to the structure served by the air conditioning unit or accompanying apparatus.

THE UNDERSIGNED HEREBY DECLARES THAT PURSUANT TO CIVIL CODE SECTION 1355, MORE THAN SEVENTY-FIVE PERCENT (75%) OF THE OWNERS COVERED UNDER THE ABOVE PROTECTIVE RESTRICTIONS HAVE APPROVED AS STATED ABOVE.

Dated: 6.2.98. John P. mularthysignature]
JOHN T. MCCARTHY [PRINT NAME]
President [POSITION]
Quail Run Homeowners associa [NAME OF SUBASSOCIATION]
STATE OF CALIFORNIA)) SS.
County of <u>SONOMA</u>)
On June 2,1998 before me PATRICIA A. Goolez personally
appeared John T Me CARThy
personally known to me (or proved to me on the basis of satisfactory evidence) to be the person(s) whose name(s) is are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies), and that by his/her/their signature(s) on the instrument the person(s), or the entity upon behalf of

signature(s) on the instrument the pers which the person(s) acted, executed the instrument.

WITNESS my hand and official seal.

_ (Seal) Signature Jossica & Market Notary Public in and for said County and State



