

DESCHUTES COUNTY OFFICIAL RECORDS  
MARY SUE PENHOLLOW, COUNTY CLERK

2001-61147



\$36.00

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12/11/2001 03:44:24 PM

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\$5.00 \$5.00 \$11.00 \$10.00 \$5.00

# DESCHUTES COUNTY CLERK

## CERTIFICATE PAGE



**This page must be included  
if document is re-recorded.  
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D-COA Cnt=2 Stn=2 TRACY  
\$5.00 \$5.00 \$11.00 \$10.00 \$5.00

11/21/2001 03:59:38 PM

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After Recording return to:  
Blue Skies Development, Inc.  
3467 SW Dosch View Ct.  
Portland, OR 97201

**\*\*Rerecorded to correct page of amended CCR's  
Previously recorded in Volume 2001 Page 57714  
SECOND AMENDMENT OF THE DECLARATIONS OF  
COVENANTS, CONDITIONS & RESTRICTIONS OF  
HOLLOW PINE ESTATES**

Blue Skies Development, Inc. a registered Oregon Corporation, the Grantor under that certain Declaration of Conditions, Covenants and Restrictions recorded on October 1, 1999 in Volume 1999, Page 49315, Official Records, and amended by instrument recorded Aug. 23, 2000, in Volume 2000, Page\* 20743 in Deschutes County, Oregon, hereby desires to modify certain terms of the Declaration as follows: \*33719

The above described Declaration of Conditions, Covenants, and Restrictions will include the following described property:

All lots in Hollow Pine Estates Phase Three, Deschutes County, Oregon.  
\*\*and all lots in Hollow Pine Estates Phase Four

Dated this 29<sup>th</sup> day of March, 2000.

INSURED BY FIRST AMERICAN TITLE  
INSURANCE COMPANY OF OREGON AS AN  
ACCOMMODATION ONLY. NO LIABILITY IS  
ASSUMED FOR THE CONDITION OF TITLE  
OR FOR THE VALIDITY, SUFFICIENCY, OR  
EFFECT OF THIS DOCUMENT.

Blue Skies Development, Inc.

BY: James F. Cozzetto, Jr.  
James F. Cozzetto, Jr., President

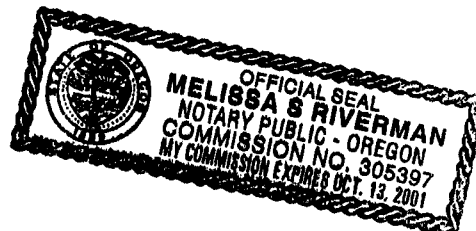
State of Oregon }  
County Deschutes } ss.

On March 29, 2000 before me, Melissa S. Riverman, Notary Public, personally appeared James F. Cozzetto, Jr., President of Blue Skies Development, Inc.

personally known to me to be the person whose name is subscribed to the within instrument and acknowledged to me that he executed the same in his authorized capacity, and that by his signature on the instrument the person or the entity upon behalf of which the person acted, executed the instrument.

WITNESS my hand and official seal.

Melissa S. Riverman  
Notary Public for Oregon



FIRST AMERICAN TITLE  
INSURANCE COMPANY OF OREGON  
P.O. BOX 323  
BEND, OR 97709