

**TRAILWIND RESIDENTIAL COMMUNITY, INC.**  
**MANAGEMENT CERTIFICATE - KAUFMAN COUNTY**

In accordance with Texas Property Code Section 209.004, Texas Residential Property Owners Protection Act, **Trailwind Residential Community, Inc.**, certifies as to the following:

1. The name of the subdivision is:

**TRAILWIND**

2. The name of the association is:

**TRAILWIND RESIDENTIAL COMMUNITY, INC.**

3. The recording data for the subdivision (plat) is:

**Declaration of Covenants, Conditions, and Restrictions**

**Doc. 2020-0025370**

4. The recording data for the declaration (including covenants, bylaws, and rules and regulations) is:

**Adoption of Working Capital Assessment  
Community Manual**

**Doc. 2020-0025388**

**Doc. 2020-0025387**

5. The recording data for each amendment to the declaration (including covenants, bylaws, and rules and regulations) is:

**First Supplement to Community Manual**

**Doc. 2021-0034247**

6. The mailing address for the association is as follows:

**TRAILWIND RESIDENTIAL COMMUNITY, INC.**  
c/o Vision Communities Management Incorporated  
5757 Alpha Road, Ste. 680  
Dallas, Texas 75240

7. The name, address, telephone number, and email address of the person managing the association or the association's designated representative are as follows:

**Vision Communities Management Incorporated**  
**5757 Alpha Road, Ste. 680**  
**Dallas, Texas 75240**  
**Phone: (972) 612-2302**  
**Email: info@vcmtexas.com**

8. The website address on which the association's dedicatory instruments are available:

<https://trailwind.nabrnetwork.com>

9. The following fees are charged by the association relating to a transfer of property within the association:

Resale Certificate:	\$340.00
Statement of Account:	\$50.00
Refinance Certificate:	\$50.00
Transfer Fee to management company:	\$250.00
Working Capital Assessment:	\$500.00

EXECUTED as of 1/9, 2022 13

Vision Communities Management  
Incorporated as managing agent for the  
association

By (signature): S. Baldwin

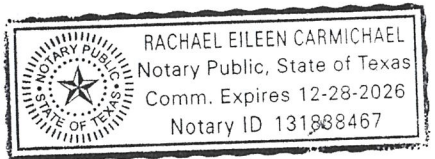
Name (printed): SHANNON BROWN

Title: COO

The State of Texas §

County of Dallas §

This instrument was acknowledged before me on the 9 day of January, 2023 by Shannon  
Brown (name), the COO (title) authorized agent for Vision  
Communities Management Incorporated.



[Signature]  
Notary Public – The State of Texas

**After Recording, Please Return To:**  
**Vision Communities Management Incorporated**  
**5757 Alpha Road, Suite 680**  
**Dallas, TX 75240**