When Recorded Mail To:

Cal-Western Reconveyance Corporation Of Washington P.O. Box 2204 El Cajon, CA 92011-9004



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Loan No.: XXXXXX7898 MERS ID: 100025440002913637

T.S. No.: 1305269-12

GUARDIAN NORTHWEST TITLE CO.

10080G

Assessor's Property Tax Parcel/Account Number(s): 4034-000-003-00009

100806

Appointment Of Successor Trustee

This Form Provided By Cal-Western Reconveyance Corporation Of Washington

KNOW ALL MEN BY THESE PRESENTS:

HARUKO HOFFSTROM, AN UNMARRIED WOMAN is the Grantor(s), and FIRST AMERICAN TITLE is the original Trustee, and MORTGAGE ELECTRONIC REGISTRATION SYSTEMS, INC., AS NOMINEE FOR LEHMAN BROTHERS BANK, FSB, A FEDERAL SAVINGS BANK is the Beneficiary under that certain Deed of Trust dated December 22, 2005 and recorded on December 28, 2005, Book XX, Page XX under Auditor's File No. 200512280179, records of SKAGIT County, Washington.

AURORA LOAN SERVICES, LLC, who is the present Beneficiary under said Deed of Trust, desires to appoint a new trustee in the place and stead of present Trustee thereunder;

NOW, THEREFORE, IN VIEW OF THE PREMISES, AURORA LOAN SERVICES, LLC HEREBY APPOINTS Cal-Western Reconveyance Corporation of Washington, whose address is 525 EAST MAIN STREET, P.O. BOX 22004, EL CAJON CA 92022-9004 as successor Trustee under said Deed of Trust, to have all powers of said original Trustee, effective forthwith.

IN WITNESS WHEREOF, AURORA LOAN SERVICES, LLC has hereunto set his hand; if AURORA LOAN SERVICES, LLC is a corporation, it has caused its corporate name to be signed and affixed hereunto by its duly authorized officer(s).

Legal Description: TRACT "A" OF SHORT PLAT NO. 42-77, APPROVED JULY 18, 1977, RECORDED JULY 19, 1977, IN VOLUME 2 OF SHORT PLATS, PAGE 85, AUDITOR'S FILE. 860874, RECORDS OF SKAGIT COUNTY, WASHINGTON, BEING A PORTION OF LOTS 3-16, INCLUSIVE "VALLEY VIEW ADDITION", AS PER PLAT RECORDED IN VOLUME 7 OF PLATS, PAGE 47, RECORDS OF SKAGIT COUNTY, WASHINGTON.

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Appointment Of Successor Trustee
This Form Provided By Cal-Western Reconveyance Corporation Of Washington

| EFFECTIVE 11/11/2010 DATE: 1/11/2010 AURORA LOAN SERVICES, LLC DATE: 1/11/2010 Amber Owens Asst. Vice President State of /// County of Marie) On 1/1/10 before me, Amber Owens Asst. Vice President State of /// Anticricounty evidence to be the person(s) whose name(s) is/are subscribed to the within instrument and asknowledged 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 which the person(s) acted, executed the instrument. I certify under PENALTY OF PERJURY under the laws of the State of /// My Commission Express 01/03/2018 My Commission Express 01/03/2018 | | |
|---|--|-----------|
| EFFECTIVE 11/11/2010 AURORA LOAN SERVICES, LLC DATE: 11/11/2010 Amber Owens Asst. Vice President State of //) County of ///// A Notary Public, personally appeared /// A Notary Public, personally appeared /// A Notary Public is signature(s) on the instrument 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 which the person(s) acted, executed the instrument. I certify under PENALTY OF PERJURY under the laws of the State of /// WITNESS my hand and official seal Signature Notary Public, Sand State of Indiana Name County | Loan No.: XXXXXX7898 | |
| Amber Owens Asst. Vice President State of //) County of Mario) On 1/1/1/0 before me, Amber Owens Asst. Vice President On 1/1/1/0 before me, Amber Owens Anotary Public, personally appeared Amber Owens 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 which the person(s) acted, executed the instrument. I certify under PENALTY OF PERJURY under the laws of the State of // Amber Groot that the foregoing paragraph is true and correct. WITNESS my hand and official seal Signature Amber Smoot Notary Public Scal State of Indiana March County | | |
| Amber Owens Asst. Vice President State of // County of Mario On 11110 before me, Amber Owens a Notary Public, personally appeared https:// a Notary Public, personally appeared https:// a sof 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 which the person(s) acted, executed the instrument. I certify under PENALTY OF PERJURY under the laws of the State of // that the foregoing paragraph is true and correct. WITNESS my hand and official seal Signature Amber Smoot Notary Public Seal State of Indiana Notary Public Seal State of Indiana Notary Public Seal State of Indiana | EFFECTIVE 11/11/2010 AURORA LOAN SERVICES, LLC | |
| State of /// County of //ar(o) On /// D before me, // Amber Smoot the foregoing paragraph is true and correct. WITNESS my hand and official seal Signature Asst. Vice President And Proving the state of me on the on the paragraph is true and correct. Witness my hand and official seal Signature Amber Smoot Notary Pubs. Seal State of Indiana Notary Pubs. Seal State of Indiana Notary County Amber County | DATE: 1/1/1/2010 Auber aus | |
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| a Notary Public, personally appeared AMDCL () WChiston, who 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 which the person(s) acted, executed the instrument. I certify under PENALTY OF PERJURY under the laws of the State of | County of Marion | |
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| that the foregoing paragraph is true and correct. WITNESS my hand and official seal Signature Amber Smoot Notary Public Seal State of Indiana Mainth County | his/her/their signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, | |
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| Amber Smoot Notery Public Seal State of Indiana Mainth County | WITNESS my hand and official seal (Seal) | |
| Notary Public Seal State of Indiana Maiori County | Signature | |
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