When Recorded Return To:

JAN WALSH AURORA LOAN SERVICES LLC. 2617 COLLEGE PARK P.O. BOX 1706 Scottsbluff, NE 69363-1706



8/5/2011 Page

1 of

1 9:20AM

Deed of Reconveyance

AURORA LOAN SERVICES LLC. #:0124337809 "ZWICKER" Lender ID:H41/010/0124337809 Skagit, Washington MERS #: 100024200016641975 SIS #: 1-888-679-6377

WHEREAS FIRST AMERICAN TITLE INSURANCE COMPANY is the present Trustee of record under the following described Deed of Trust:

Trustor: BRIAN D. ZWICKER, LEIGH ZWICKER, HUSBAND AND WIFE

Beneficiary: MORTGAGE ELECTRONIC REGISTRATION SYSTEMS, INC. AS NOMINEE FOR AMERICAN

BROKERS CONDUIT IT'S SUCCESSORS AND ASSIGNS

Original Beneficiary: MORTGAGE ELECTRONIC REGISTRATION SYSTEMS, INC. AS NOMINEE FOR AMERICAN

BROKERS CONDUIT IT'S SUCCESSORS AND ASSIGNS

Original Trustee: FIRST AMERICAN TITLE INSURANCE COMPANY

Dated: 03/19/2007 Recorded: 03/27/2007 in Book/Reel/Liber: N/A Page/Folio: N/A as Instrument No.: 200703270123 In the Records of the County-Recorder of Skagit, State of Washington.

Property Address: 10169 SAMISH ISLAND RD, BOW, WA 98232

AND WHEREAS, the above said Deed of Trust has been paid in full;

NOW THEREFORE, the present Trustee having received from the present owner of the beneficial interest under said Deed of Trust and the obligations secured thereby a written request to reconvey by reason of the obligations secured by said Deed of Trust,

DOES HEREBY RECONVEY, without warranty, to the person or persons legally entitled thereto, the estate, title and interest now held by it under said Deed of Trust, describing the land therein as more fully described in said Deed of

By FIRST AMERICAN TITLE INSURANCE COMPANY as Trustee

ALD E. ROONEX VICE PRESIDENT

STATE OF South Carolina COUNTY OF Lexington

before me, a Notary Public in and for Lexington County in the State of South Carolina, personally appeared RONALD E. ROONEY, VICE PRESIDENT, 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, and that by his/her/their signature on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument.

WITNESS my hand and official seal,



(This area for notarial seal)