When Recorded Return To:

Release Department LOANCARE, A DIVISION OF FNF SERVICING, INC PO Box 8068 Virginia Beach, VA 23450



Deed of Reconveyance
LOANCARE, A DIVISION OF FNF SERVICING, INC #:4820213 "HANSON" Lender ID:640/0201542119 Skagit, Washington MERS #: 100073000831040340 SIS #: 1-888-679-6377

WHEREAS TRUSTEE SERVICES, INC. is the present Trustee of record under the following described Deed of

Trustor: LISA A . ARAGON, AS HER SEPARATE ESTATE AND TERESA A . HANSON AS HER SEPARATE

Beneficiary: MORTGAGE ELECTRONIC REGISTRATION SYSTEMS, INC. ("MERS") AS NOMINEE SOLELY FOR FREEDOM MORTGAGE CORPORATION

Original Beneficiary: FREEDOM MORTGAGE CORPORATION

Original Trustee: BISHOP, WHITE & MARSHALL, P.S.

Dated: 02/05/2009 Recorded: 02/11/2009 in Book/Reel/Liber: N/A Page/Folio: N/A as Instrument No.:

200902110044 In the Records of the County Recorder of Skagit, State of Washington.

Property Address: 40229 CAPE HORN RD, CONCRETE, WA 98237

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 Trust.

By TRUSTEE SERVICES, INC. as Trustee On June 29th, 2012

TAMMIE L ORMEROD , ASSISTANT SECRETARY

STATE OF Washington COUNTY OF Kitsap

On June 29th, 2012, before me, KIMBER M. HAMM, a Notary Public in and for Kitsag in the State of Washington, personally appeared TAMMIE L ORMEROD , ASSISTANT SECRETARY, 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,

KIMBER M. HAMM

Notary Expires: 04/01/2016

**NOTARY PUBLIC** State of Washington KIMBER M HAMM MY COMMISSION EXPIRES 04/01/2016

(This area for notarial seal)