

When recorded return to:

CoreLogic  
450 E Boundary St.  
Chapin, SC 29036



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Skagit County Auditor  
6/12/2015 Page

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\$14.00  
1 11:35AM

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**APPOINTMENT OF SUCCESSOR TRUSTEE**

M&T BANK #:0052712569 "SELFRIDGE" Lender ID:Q08/0203606447 Skagit, Washington  
MIN #: 100164301000142523 SIS #: 1-888-679-6377

WHEREAS, the undersigned is the present Beneficiary under the Deed of Trust Described as follows:

Original Trustor : LISA SELFRIDGE, AN UNMARRIED WOMAN  
Original Beneficiary : MORTGAGE ELECTRONIC REGISTRATION SYSTEMS, INC. ("MERS") AS NOMINEE FOR THE BANK OF THE PACIFIC, A WASHINGTON BANKING CORPORATION ITS SUCCESSORS AND ASSIGNS  
Dated: 10/15/2009 Recorded: 10/16/2009 in Book/Reel/Liber: N/A Page/Folio: N/A as Instrument No.: 200910160100 In the County of Skagit State of Washington

Property Address: 13934 AVON ALLEN ROAD, MOUNT VERNON, WA 98273

AND WHEREAS, the undersigned, who is the present Beneficiary under said Deed of Trust, desires to appoint a successor Trustee under said Deed of Trust in the place and stead of present Trustee thereunder;

Now therefore, the undersigned hereby appoints FIRST AMERICAN TITLE INSURANCE COMPANY whose address is 450 E BOUNDARY STREET, CHAPIN, SC 29036 as Successor Trustee under said Deed of Trust, to have all the powers of said original Trustee, effective immediately.

MORTGAGE ELECTRONIC REGISTRATION SYSTEMS, INC. ITS SUCCESSORS AND ASSIGNS  
On May 19th, 2015

By: \_\_\_\_\_  
Tiffany A. Kisloski, Assistant Secretary

STATE OF New York  
COUNTY OF Erie

On the 19th day of May in the year 2015 before me, the undersigned Notary Public in and for said State, personally appeared Tiffany A. Kisloski, Assistant Secretary, personally known to me or proved to me on the basis of satisfactory evidence to be the individual(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 capacity(ies), and that by his/her/their signature(s) on the instrument the individual(s), or the person upon behalf of which the individual(s) acted, executed the instrument.

WITNESS my hand and official seal,

\_\_\_\_\_  
TASHIA L CAPERS  
Notary Expires: 05/21/2016  
Qualified in Erie County

TASHIA L. CAPERS  
Lic. #01CA0262156  
Notary Public State of New York  
Qualified in Erie  
My Commission Expires 05/21/2016

(This area for notarial seal)