



Release Department
LOANCARE, LLC
PO Box 8068
Virginia Beach, VA 23450

Skagit County Auditor

\$72.00

7/14/2015 Page

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1 9:05AM

W369846T

Deed of Reconveyance

LOANCARE, LLC #:0008264857 "ARAGON" Lender ID:691/0209178567 Skagit, Washington
MIN #: 100073000853995744 SIS #: 1-888-679-6377

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

Trustor: JARROD ARAGON AND EVA ARAGON, HUSBAND AND WIFE
Beneficiary: MORTGAGE ELECTRONIC REGISTRATION SYSTEMS, INC., AS NOMINEE FOR FREEDOM
MORTGAGE CORPORATION, ITS SUCCESSORS AND ASSIGNS
Original Beneficiary: MORTGAGE ELECTRONIC REGISTRATION SYSTEMS, INC., AS NOMINEE FOR
FREEDOM MORTGAGE CORPORATION, ITS SUCCESSORS AND ASSIGNS
Original Trustee: CHICAGO TITLE INSURANCE COMPANY
Dated: 08/30/2012 Recorded: 09/11/2012 in Book/Reel/Liber: N/A Page/Folio: N/A as Instrument No.:
201209110031 In the Records of the County Recorder of Skagit, State of Washington.
Property Address: 721 N REED ST, SEDRO WOOLLEY, WA 98284

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

NOW THEREFORE, the present Trustee having received from the present Beneficiary 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, 2015

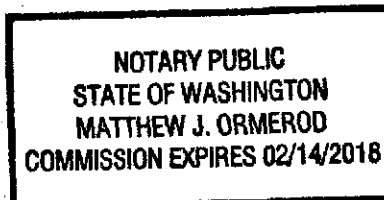
JACOB A. HAMM, ASSISTANT SECRETARY

STATE OF Washington
COUNTY OF Kitsap

On June 29th, 2015, before me, MATTHEW J. ORMEROD, a Notary Public in and for Kitsap in the State of Washington, personally appeared JACOB A. HAMM, 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,

MATTHEW J. ORMEROD
Notary Expires: 02/14/2018 #170767



(This area for notarial seal)