

AFTER RECORDING MAIL TO:

First American Title Insurance Company  
4710 Summitview Ave #104  
Yakima WA 98908



201608310073

Skagit County Auditor

\$73.00

8/31/2016 Page

1 of

1 12:15PM

Filed for Record at Request of:  
First American Title Insurance Company

Space above this line for Recorders use only

### PARTIAL RECONVEYANCE

File No: **4435-2728671 (Escrow:  
0030518)**

Date: **08/29/2016**

The undersigned as trustee under that certain Deed of Trust, dated **1/5/2013** in which **Twin Bridges Marina, LLC a Washington Limited Liability Company**, is grantor and **James E. Youngsman and Ruth M. Youngsman, Husband and Wife**, is beneficiary, recorded on **4/8/2013**, as Auditor's File No. **201304080149**, records of **Skagit** County, Washington, having received from the beneficiary under said Deed of Trust a written request to reconvey, does hereby reconvey, without warranty, to the person(s) entitled thereto all of the right, title and interest now held by said trustee in and to the property described in said Deed of Trust, situated in **Skagit** County, Washington, as follows:

**LEGAL DESCRIPTION:** Real property in the County of Skagit, State of Washington, described as follows:

**LOT 1-A, SKAGIT COUNTY BINDING SITE PLAN NO. PL 15-0313, APPROVED AND RECORDED DECEMBER 29, 2015, RECORDED UNDER AUDITOR'S FILE NO. 201512290013, RECORDS OF SKAGIT COUNTY, WASHINGTON.**

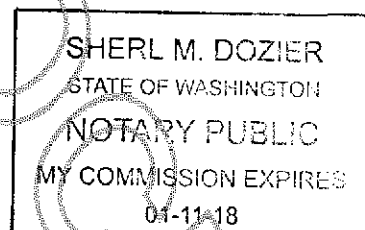
**SITUATE IN THE COUNTY OF SKAGIT, STATE OF WASHINGTON.**

**APN: P20279/8076-000-001-0000**

Dated: August 29, 2016

First American Title Insurance Company

By: Christine M. Willis  
Christine M. Willis, Authorized Signor



STATE OF Washington )  
 )-ss  
COUNTY OF Yakima )

I certify that I know or have satisfactory evidence that **Christine M. Willis** is/are the person(s) who appeared before me, and said person(s) acknowledged that he/she/they signed this instrument, on oath stated that he/she/they is/are authorized to execute the instrument and acknowledged it as the **Authorized Signor** of **First American Title Insurance Company** to be the free and voluntary act of such party(ies) for the uses and purposes mentioned in this instrument.

Dated: 8-29-2016

Sherl M. Dozier

Sherl M. Dozier

Notary Public in and for the State of Washington

Residing at: Yakima, WA

My appointment expires: January 11, 2018