When Recorded Return To:

LIÊN RELEASE FIFTH THIRD BANK **38 FOUNTAIN SQUARE PLAZA** MD# 1MOBB1 CINCINNATI, OH 45273-9276



Skagit County Auditor 10/2/2017 Page

\$74.00

1 of

1 11:02AM

W4754639

FIFTH THIRD BANK#: 2005 "SIMMONS" Lender ID:0045300/1736472265 Skagit, Washington MIN #:100925210150923014 SIS #: 1-888-679-6377

WHEREAS Trustee Services, Inc. is the present Trustee of record under the following described Deed of Trust;

Trustor: ANNMARIE H SIMMONS and THOMAS B SIMMONS , A MARRIED COUPLE Beneficiary: MORTGAGE ELECTRONIC REGISTRATION SYSTEMS, INC. ("MERS"), AS NOMINEE FOR GENEVA FINANCIAL, LLC, BENEFICIARY OF THE SECURITY INSTRUMENT, ITS SUCCESSORS AND ASSIGNS.

Original Beneficiary: MORTGAGE ELECTRONIC REGISTRATION SYSTEMS, INC. ("MERS"), AS DESIGNATED NOMINEE FOR GENEVA FINANCIAL, LC, BENEFICIARY OF THE SECURITY INSTRUMENT, ITS SUCCESSORS AND ASSIGNS.

Original Trustee: CHICAGO TITLE

Dated: 01-06-2016 Recorded: 01-06-2016 as Instrument No. 201601060064, Book/Reel/Liber N/A, Page/Folio N/A In the Records of the County Recorder of Skagit, State of Washington.

Property Address: 26225 JUSJAY LN, SEDRO WOOLLEY, WA 98284

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

NOW THEREFORE, the present Trustee having regeived from the present Beneficiary under said Deed of Trust and the obligations secured thereby a written request to recorvey 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 22 On

 $\sim$ Βv

JACOB A. HAMM, Assistant Vice-President

STATE OF Washington COUNTY OF, KITSAP

9/27/17 , before me, MATTHEW J ORMEROD, a Notary Public in and for KITSAP in the On State of Washington, personally appeared JACOB A. HAMM, Assistant 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

U G.

MATTHEW J ORMEROD Notary Expires: 2/14/2018



(This area for notarial seal)



\*9/14/2017 3:24:23 AM\*74774252\*74774256\*1607\*WASTATE\_TRUST\_REL