Skagit County Auditor

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3/26/2018 Page

\$74.00 8:36AM

M&T BANK 4TH FLOOR-LIEN RELEASE DEPT. PO BOX 5178 BUFFALO, NY 14240-9886

When Recorded Return To:

<u>Deed of Reconveyance</u>

M&T BANK #:0101755593 "PETERS" Lender ID:Q92/0218903176 Skagit, Washington

MIN #: 100392411201664235 SIS #: 1-888-679-6377

WHEREAS NATIONWIDE TITLE CLEARING, INC. is the present Trustee of record under the following described Deed of Trust:

Trustor: JERRY PETERS, A MARRIED MAN AS HIS SEPARATE ESTATE

Beneficiary: MORTGAGE ELECTRONIC REGISTRATION SYSTEMS, INC. ("MERS"), as designated nominee

for \( \), beneficiary of the security instrument, its successors and assigns
Original Beneficiary: MORTGAGE ELECTRONIC REGISTRATION SYSTEMS, INC. ("MERS") AS DESIGNATED Original Beneticiary: MORTGAGE ELECTRONIC REGISTRATION STSTEMS, INC. (MERS) AS DESIGNATED NOMINEE FOR FAIRWAY INDEPENDENT MORTGAGE CORPORATION, BENEFICIARY OF THE SECURITY INSTRUMENT, ITS SUCCESSORS AND ASSIGNS Original Trustee: FIRST AMERICAN TITLE INSURANCE COMPANY Dated: 01/06/2017 Recorded: 01/06/2017 in Book/Reel/Liber: N/A Page/Folio: N/A as Instrument No.:

201701060083 In the Records of the County Recorder of Skagit, State of Washington.

Property Address: 302 S GARDNER RD, BURLINGTON, WA 98233

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

NOW THEREFORE, the present Trustee liaving 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

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 NATIONWIDE TITLE CLEARING, INC. as Trustee 0n 03-16-2018

Kfarway Independent Mortgrige Corporation

STATE OF Florida COUNTY OF Pinella

On 3116/2018, before me, Shewmom 5, a Notary Public in and for MC in the State of 500 00, personally appeared 200 ee , 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,

Notary Expires 10/13/2020

helah nom

SHEILAH MORRIS SHEILAH MOON SHELL OF Florida
Notary Public - State of Florida
Notary Public - State of Florida
Notary Public - State of Florida My Commission #GG 38533 Expires October 13,2020

(This area for notarial seal)