201912170068

12/17/2019 11:35 AM Pages: 1 of 1 Fees: \$103.50

Skagit County Auditor, WA

When Recorded Return To:

Release Department LOANCARE, LLC P.O. BOX 8068 Virginia Beach, VA 23450-4968

W5980237E

Deed of Reconveyance

LOANCARE, LLC #:0033784596 "YOUNGER" Lender ID:6DS/0221913327 Skagit, Washington MIN #: 100392411203076438 SIS #: 1-888-679-6377

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

Trustor: COLE B YOUNGER AND CHARLSEA YOUNGER, A MARRIED COUPLE
Beneficiary: MORTGAGE ELECTRONIC REGISTRATION SYSTEMS, INC, AS BENEFICIARY, AS NOMINEE,
FOR FAIRWAY INDEPENDENT MORTGAGE CORPORATION (MERS), ITS SUCCESSORS AND ASSIGNS
Original Beneficiary: MORTGAGE ELECTRONIC REGISTRATION SYSTEMS, INC., AS NOMINEE FOR
FAIRWAY INDEPENDENT MORTGAGE CORPORATION, ITS SUCCESSORS AND ASSIGNS
Original Trustee: FIRST AMERICAN TITLE INSURANCE COMPANY
Dated: 06/14/2018 Recorded: 06/19/2018 in Book/Reel/Liber: N/A Page/Folio: N/A as Instrument No.:

201806190015 in the Records of the County Recorder of Skagit, State of Washington.
Property Address: 5502 RAZOR PEAK DR, MOUNT VERNON, WA 98273

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

NOW THEREFORE, the present Trustee having received from the present nominee for the 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

By TRUSTEE SERVICES, INC. as Trustee

On December 6th, 2019

JACOB HAMM, ASSISTANT VICE PRESIDENT

STATE OF Washington COUNTY OF Kitsap

On December 6th, 2019, before me, MATTHEW J. ORMEROD, a Notary Public in and for Kitsap in the State of Washington, personally appeared JACOB 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,

MATTHEW & ØRMEROD

Notary Expires: 02/14/2022 #170767

NOTARY PUBLIC STATE OF WASHINGTON MATTHEW J ORMEROD COMMISSION EXPIRES 02/14/2022 **COMM LIC # 170767**

(This area for notarial seal)