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12/02/2020 08:39 AM Pages: 1 of 2 Fees: \$104.50 Skagit County Auditor

WHEN RECORDED MAIL TO: FIRST AMERICAN MORTGAGE SOLUTIONS 1795 INTERNATIONAL WAY IDAHO FALLS, ID 83402 PH. 208-528-9895

DEED OF RECONVEYANCE

WASHINGTON COUNTY OF SKAGIT RECORD 2ND

PARCEL NO. 48850000100000 LEGAL DESCRIPTION: LOT 10, HARVEST EDGE, FILE NO. 200603170131 SKAGIT COUNTY

THE UNDERSIGNED, FIRST AMERICAN TITLE INSURANCE COMPANY, located at 1 FIRST AMERICAN WAY, SANTA ANA, CA 92707, as Trustee, Successor Trustee, or Substitute Trustee, under that certain Deed of Trust dated AUGUST 16, 2011, executed by ARMANDO PADRON, A SINGLE MAN, Trustor, to CHICAGO TITLE COMPANY, Original Trustee, for the benefit of MORTGAGE ELECTRONIC REGISTRATION SYSTEMS, INC. ("MERS"), AS DESIGNATED NOMINEE FOR TMBG, INC., BENEFICIARY OF THE SECURITY INSTRUMENT, ITS SUCCESSORS AND ASSIGNS, Original Beneficiary, and recorded on AUGUST 18, 2011 as Auditor's File No. 201108180063, in the Records of the County Auditor's Office for SKAGIT County, State of WASHINGTON.

PROPERTY ADDRESS: 484 HARVEST EDGE PL, BURLINGTON, WA 98233

WHEREAS, the Undersigned received from BANK OF AMERICA, N.A., the Beneficiary of said Deed of Trust, a written request to reconvey, reciting that the obligation secured by said Deed of Trust has been fully paid and performed, does hereby grant, bargain, and convey, without any covenant or warranty, express or implied, to the person or persons legally entitled thereto, all of the estate held by the Undersigned in and to said described premises by virtue of said Deed of Trust.

IN WITNESS WHEREOF, the undersigned has caused this Instrument to be executed on NOVEMBER 19, 2020.

FIRST AMERICAN TITLE INSURANCE COMPANY

SEANAE ERIN MORIARTY, VICE PRESIDENT

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MIN: 100785600000004933 MERS PHONE: 1-888-679-6377 Attached to the Deed of Reconveyance dated November 19, 2020

STATE OF ARIZONA

COUNTY OF MARICOPA

) ss.

On NOVEMBER 19, 2020, before me, MARIA PUNZO, Notary Public, personally appeared SEANAE ERIN MORIARTY, VICE PRESIDENT of FIRST AMERICAN TITLE INSURANCE COMPANY, whose identity was proven to me on the basis of satisfactory evidence to be the person who he or she claims to be and whose name is subscribed to the within instrument and acknowledged to me that they executed the same in their authorized capacity, and that by their signature on the instrument the person, or entity, who they acted on the behalf of, executed the instrument.

MARIA PUNZO (COMMISSION EXP. 05/15/2021)

NOTARY PUBLIC

