202108100033 08/10/2021 09:45 AM Pages: 1 of 4 Fees: \$21.00 Skagit County Auditor, WA

AFTER RECORDING MAIL TO:

First American Title Insurance Company 920 Fifth Avenue, Suite 1200 Seattle, WA 98104

Filed for Record at Request of: National Commercial Services Space above this line for Recorders use only

APPOINTMENT OF SUCCESSOR TRUSTEE

File No: NCS-1067082-WA1

Whereas, the undersigned are the current beneficiary of that certain Deed of Trust dated **January 19**, **1990**, recorded **January 19**, **1990**, under **Skagit** County Auditor's File Number **9001190089**, in which **Clifford Olin and Valerie Olin**, **h**/**w**, are grantors, and **Land Title Company of Skagit Title** is the original named trustee, and **Chester A. Cook** is the original beneficiary.

Whereas, the undersigned desires to appoint a new trustee to act in the place and stead of the trustee named in the Deed of Trust;

Now, therefore, the undersigned hereby appoints **First American Title Insurance Company** (whose address is **920 Fifth Avenue, Suite 1200, Seattle, WA 98104**) as successor trustee under the Deed of Trust to have all of the powers of the original trustee effective immediately.

Dated:

BENEFICIARY:

Susan Delzell

Cameron Bonk

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8/5/21 Dated:

BENEFICIARY:

Susan Delzell

Cameron Bonk

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LOZY

STATE OF	Pennsylvania)
COUNTY OF	Allecheny)-ss.)

I certify that I know or have satisfactory evidence that Susan Delzell is the person who appeared before me, and said person acknowledged that he/she/they signed this instrument and acknowledged it to be his/her/their free and voluntary act for the uses and purposes mentioned in this instrument.

30JUL 202 Dated: ___ Print Name: Dana Notary Public in the State of Pennsylvania Commonwealth of Pennsylvania - Notary Seal Dana M. Pcolar, Notary Public My appointment expires 12 Westmoreland County My commission expires July 12, 2024 Commission number 1270686 Member, Pennsylvania Association of Notaries STATE OF -\$\$. COUNTY OF

I certify that I know or have satisfactory evidence that Cameron Bonk is the person who appeared before me, and said person acknowledged that he/she/they signed this instrument and acknowledged it to be his/her/their free and voluntary act for the uses and purposes mentioned in this instrument.

Dated:

Print Name: Notary Public in the State of ____ My appointment expires ____

STATE OF	· · · · · · · · · · · · · · · · · · ·)
COUNTY OF)-ss.
COUNTION)

I certify that I know or have satisfactory evidence that **Susan Delzell** is the person who appeared before me, and said person acknowledged that he/she/they signed this instrument and acknowledged it to be his/her/their free and voluntary act for the uses and purposes mentioned in this instrument.

Dated:			Print Name:	
			Notary Public in the State of My appointment expires	
			·	
STATE OF	New York)		
COUNTY OF	New Juin)-ss.)		

I certify that I know or have satisfactory evidence that **Cameron Bonk** is the person who appeared before me, and said person acknowledged that he/she/they signed this instrument and acknowledged it to be his/her/their free and voluntary act for the uses and purposes mentioned in this instrument.

2021 Dated:

Print Name: ____ Avgusto M. Notary Public in the State of Me-My appointment expires 10/20 2

AUGUSTO MADERA NOTARY PUBLIC-STATE OF NEW YORK No. 01MA6366602 Qualified In New York County My Commission Expires 10-30-2021