Space above this line for recorders use only

Skagit County Auditor, WA

When recorded return to:

Quality Loan Service Corp. of Washington
108 1st Ave South, Suite 450
Seattle, WA 98104

TS No.: WA-22-947226-RM

Order No.: 02-22011043

APN No.: P125760 / 4917-000-064-0000

## **Appointment of Successor Trustee**

NOTICE IS HEREBY GIVEN that QUALITY LOAN SERVICE CORPORATION OF WASHINGTON, whose address is 108 1<sup>st</sup> Ave South, Suite 450, Seattle, Washington 98104 is hereby appointed Successor Trustee under that certain Deed of Trust dated 9/21/2018, executed by JOSHUAP. SCHMIDT, A MARRIED MAN AS HIS SEPARATE ESTATE as Grantor, in which FIDELITY NATIONAL TITLE INSURANCE COMPANY was named as Trustee, MORTGAGE ELECTRONIC REGISTRATION SYSTEMS, INC. ("MERS"), SOLELY AS NOMINEE FOR ROUNDPOINT MORTGAGE SERVICING CORPORATION, Its Successors and Assigns as Beneficiary, and recorded on 10/1/2018, under Instrument No. 201810010240 Official Records whereas, Freedom Mortgage Corporation is the present Beneficiary under said Deed of Trust, and desires to appoint and hereby does appoint QUALITY LOAN SERVICE CORPORATION OF WASHINGTON as the new Trustee in place and stead of the present Trustee thereunder.

Said Deed of Trust Encumbers the real property situated in **SKAGIT** County, **Washington** and is fully described as:

LOT 64, PLAT OF CEDAR HEIGHTS PUD 1, PHASE 1, ACCORDING TO THE PLAT THEREOF, RECORDED JANUARY 19, 2007 UNDER AUDITOR'S FILE NO. 200701190116, RECORDS OF SKAGIT COUNTY, WASHINGTON.

And more commonly known as: 208 SHANTEL ST, MOUNT VERNON, WA 98274

Trustee Sale Number: WA-22-947226-RM

NOW THEREFORE, the undersigned, Freedom Mortgage Corporation, hereby substitutes QUALITY LOAN SERVICE CORPORATION OF WASHINGTON as Trustee under said Deed of Trust.

## Freedom Mortgage Corporation

	•	<b>3</b>	•
State of: Indiana,			
County of: Harilton,			
On LOV a 2022 before personally appeared Karneen	me, Erich	HATracy	_ a notary public,
me on the basis of satisfactory eviden within instrument and acknowledged	ce to be the persoln(s to me that he/she/	) whose name(s) is/a they executed the sa	re subscribed to the
authorized capacity(ies), and that by h entity upon behalf of which the person(	s) acted, executed the	instrument.	
Given under my hand and official seal t	day of	NO/20 22	_
Signature and seal stamp of officer			
Notary Public in and for the State of	ndian-		UCA D TRACY Notary Public SKAL Pata of Indiana
My Commission expires:	<u>6-3</u> 3	MA COM	RION COUNTY MISSION 674738 on Expires October 26, 2023

Trustee Sale Number: WA-22-947226-RM