

Record and Return To:

Information Systems and Networks
Corporation
Release Department
2000 N Classen Blvd Suite 3200
Oklahoma City, OK 73106

Drafted By: JOLISA JONES

Loan #: 566-2868262

SUBSTITUTION OF TRUSTEE AND FULL RECONVEYANCE

WHEREAS, **SHELBY D MARTIN & SABRINA N MARTIN, husband and wife**, was the original Trustor under that certain Deed of Trust dated **05/16/2022**, and recorded **06/06/2022**, as Instrument or Document No. **202206060078**, of Official Records of the County of **Skagit**, State of **Washington** ;

WHEREAS, the undersigned, Secretary of Housing and Urban Development, as the present Beneficiary(s) under said Deed of Trust hereby substitutes a new trustee, Trustee Services, Inc., under said Deed of Trust, and Trustee Services, Inc. as Trustee under said Deed of Trust does hereby reconvey, without warranty, to the person or persons legally entitled thereto, the estate now held by trustee under said Deed of Trust. And whereas the above said Deed of Trust has been paid in full.

Loan Amount: **\$10016.34**

Original Beneficiary: **Secretary of Housing and Urban Development**

Property Address: **3924 E DIVISION ST MOUNT VERNON, WA 98273-0000**

Date: **01/31/2023**.

Current Beneficiary:

**Secretary of Housing and Urban
Development by Its Attorney in Fact
Information Systems and Networks
Corporation**

By:



Name: **Lameka Oakes**

Title: **Authorized Agent**

Power of Attorney previously recorded

on **05/03/2022**, as Instrument No.

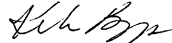
202205030075, in **Skagit County**

County, W A.

STATE OF **Oklahoma** } s.s.
COUNTY OF **Oklahoma**

On **01/31/2023**, before me, **Kenisha Briggs**, Notary Public, personally appeared **Lameka Oakes, Authorized Agent of Information Systems and Networks Corporation, Attorney in Fact for Secretary of Housing and Urban Development**, personally known to me (or proved to me the basis of satisfactory evidence) to be the person whose name is subscribed to the within instrument and acknowledged to me that she/he/they executed the same in her/his/their authorized capacity(ies), and that by her/his/their signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument.

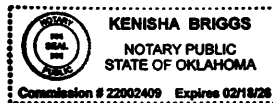
Witness my hand and official seal.



Notary Public: **Kenisha Briggs**


My Commission Expires: **02/18/2026**

Commission #: **22002409**



IN WITNESS WHEREOF, this instrument was executed, signed and delivered by the undersigned effective 2/1/2023

Trustee Services, Inc.

By: 
Name: Daniel W. Ormerod
Title: President

State of WA
County of Kitsap

On 2/2/2023 before me, Grant Larson, Notary Public, personally appeared Daniel W. Ormerod, President of Trustee Services, Inc., who proved to me on the basis of satisfactory evidence to be the person whose name is subscribed to the within instrument and acknowledged to me that he/she executed the same in his/her authorized capacity, and that by his/her signature on the instrument the person, or the entity on behalf of which the person(s) acted, executed the instrument.

WITNESS my hand and official seal.



Notary Public: Grant Larson
My commission expires: 04/02/2025

