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04/25/2025 08:36 AM Pages: 1 of 2 Fees: \$19.00

Skagit County Auditor, WA

AND WHEN RECORDED MAIL TO:

North Star Trustee, LLC 6100 219th ST SW, Suite 480 Mountlake Terrace, WA 98043

SPACE ABOVE THIS LINE FOR RECORDER'S USE

T.S. #: 25-74151

APPOINTMENT OF SUCCESSOR TRUSTEE

NOTICE IS HEREBY GIVEN that North Star Trustee, LLC, 6100 219th ST SW, Suite 480, Mountlake Terrace, WA 98043 is appointed successor trustee under that certain deed of trust in which VICTORIA BIDWELL, A SINGLE WOMAN is the Grantor, and LANDSAFE TITLE OF WASHINGTON is the Trustee, and Mortgage Electronic Registration Systems, Inc. ("MERS"), as designated nominee for COUNTRYWIDE HOME LOANS, INC., beneficiary of the security instrument, its successors and assigns is the Beneficiary under that Trust Deed dated 6/18/2007, and recorded on 7/5/2007, under Auditor's File No. 200707050029 of the Records of Skagit County, Washington, it to have all the powers of said original trustee, effective footbuilth

IN WITNESS WHEREOF, the undersigned Beneficiary has hereunto set his hand; if the undersigned is a corporation, it has caused its corporate name to be signed and affixed hereunto by its duly authorized officers.

APR 2 2 2025 CARRINGTON MORTGAGE SERVICES LLC AS SERVICER FOR THE BANK OF NEW YORK MELLON, F/K/A THE BANK OF NEW YORK AS TRUSTEE FOR REGISTERED HOLDERS OF CWARS, ING., ASSET-BACKED CERTIFICATES, SERIES 2007/12 Elizabeth Corral Default Fulfillment Manager County of , Notary Public, personally appeared before me personally 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(ies), and that by his/her/their signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument. I certify under PENALTY OF PERJURY under the laws of the State of foregoing paragraph is true and correct. See Attached WITNESS my hand and official seal.

A notary public or other officer completing this certificate verifies only the identity of the individual who signed the document, to which this certificate is attached, and not the truthfulness, accuracy, or validity of that document.

State of California

County of Orange

On April 22, 2025, before me, Alex Ramos Cruz, Notary Public, personally appeared, Elizabeth Corral, who 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(ies), and that by his/her/their signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument.

I certify under PENALTY OF PERJURY under the laws of the State of California that the foregoing paragraph is true and correct.

Signature Signature	cial seal. (Seal)	
	ADDITIONAL OPTIONAL INFORM	MATION

DESCRIPTION OF THE ATTACHED DOCUMENT (Title or description of attached document) (Title or description of attached document continued) Number of Pages Document Date (Additional information)

APAC	ITY CLAIMED BY THE SIGNER
	Individual (s)
	Corporate Officer
	(Title) Partner(s) Attorney-in-Fact Trustee(s) Other

INSTRUCTIONS FOR COMPLETING THIS FORM Any acknowledgment completed in California must contain verbiage exactly as appears above in the notary section or a separate acknowledgment form must be appears above in the holary section or a separate acknowledgment from inits to experion is if a document fits only exception is if a document is to be recorded outside of California. In such instances, any alternative acknowledgment verbinge as may be printed on such a document so long as the verbinge does not require the notary to do something that is tilegal for a notary in California (i.e. certifying the authorized capacity of the signey). Please check the document carefully for proper notatial wording and attach this form if required

- . State and County information must be the State and County where the document signer(s) personally appeared before the notary public for acknowledgment.

 Date of notarization must be the date that the signer(s) personally appeared which
- must also be the same date the acknowledgment is completed.
- The notary public must print his or her name as it appears within his or her commission followed by a comma and then your title (notary public).
- · Print the name(s) of document signer(s) who personally appear at the time of
- . Indicate the correct singular or plural forms by crossing off incorrect forms (i.e. he/she/they- is /are) or circling the correct forms. Failure to correctly indicate this information may lead to rejection of document recording.
- The notary seal impression must be clear and photographically reproducible. Impression must not cover text or lines. If seal impression smudges, re-seal if a sufficient area permits, otherwise complete a different acknowledgment form.
- Signature of the notary public must match the signature on file with the office of the county clerk.

 Additional information is not required but could help to ensure this

- acknowledgment is not misused or attached to a different document. Indicate title or type of attached document, number of pages and date, Indicate the capacity claimed by the signer. If the claimed capacity is a corporate officer, indicate the title (i.e. CEO, CFO, Secretary).
- Securely attach this document to the signed document