

202510090001

10/09/2025 08:32 AM Pages: 1 of 2 Fees: \$304.50  
Skagit County Auditor, WA

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**  
LOAN NO.: **3543998487**



PARCEL NO. **3966-001-041-0005**

LEGAL DESCRIPTION: **PIN 41 BLOCK: 1 PEAVEYS ACREAGE**

THE UNDERSIGNED, **FIRST AMERICAN TITLE INSURANCE COMPANY**, located at **1 FIRST AMERICAN WAY, SANTA ANA, CA 92707**, the Trustee, under that certain Deed of Trust dated **JULY 31, 2024**, executed by **DIANA L. GOODMAN, A SINGLE PERSON**, Trustor, to **FIRST AMERICAN TITLE INSURANCE COMPANY**, Original Trustee, for the benefit of **MORTGAGE ELECTRONIC REGISTRATION SYSTEMS, INC. ("MERS")**, AS DESIGNATED NOMINEE FOR **ROCKET MORTGAGE, LLC**, BENEFICIARY OF THE SECURITY INSTRUMENT, ITS SUCCESSORS AND ASSIGNS, Original Beneficiary, and recorded on **AUGUST 06, 2024** as Auditor's File No. **202408060032**, in the Records of the County Auditor's Office for **SKAGIT** County, State of **WASHINGTON**.

PROPERTY ADDRESS: **26456 HOEHN RD, SEDRO WOOLLEY, WASHINGTON 98284-8378**

WHEREAS, the Undersigned received from **MORTGAGE ELECTRONIC REGISTRATION SYSTEMS, INC. ("MERS")**, AS DESIGNATED NOMINEE FOR **ROCKET MORTGAGE, LLC**, BENEFICIARY OF THE SECURITY INSTRUMENT, ITS SUCCESSORS AND ASSIGNS, 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 **OCTOBER 09, 2025**.  
**FIRST AMERICAN TITLE INSURANCE COMPANY**

**TRACY ALBERTSON, VICE PRESIDENT**

POD: 20250929

QL8040120IM - LR - WA



Page 1 of 2



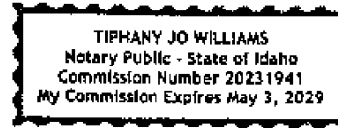
MIN: 100039035439984872  
MERS PHONE: 1-888-679-6377

STATE OF IDAHO COUNTY OF BONNEVILLE ) ss.

On **OCTOBER 09, 2025**, before me, **TIPHANY JO WILLIAMS**, personally appeared **TRACY ALBERTSON** known to me to be the **VICE PRESIDENT** of **FIRST AMERICAN TITLE INSURANCE COMPANY** the corporation that executed the instrument or the person who executed the instrument on behalf of said corporation, and acknowledged to me that such corporation executed the same.



**TIPHANY JO WILLIAMS (COMMISSION EXP. 05/03/2029)**  
NOTARY PUBLIC



This document contains electronic signatures.