

Skagit County Auditor 7/1/2013 Page

\$15.00 2 9:57AM

Account No.: MIN1001863-0000118802-6

MERS Tel.: (888) 679 MERS

AFTER RECORDING FORWARD TO:

Dovenmuehle Mortgage Inc. 1 Corporate Drive, Suite 360 Lake Zurich, IL 60047-8924

PREPARED BY:

(800)-669-4268 Anil Ratnottar

Dovenmuehle Mortgage Inc. 1 Corporate Drive, Suite 360 Lake Zurich, IL 60047-8924

Dovenmuehle Mortgage, Inc.

1428513046 CARRILLO

Lender Id :

G86

SUBSTITUTION OF TRUSTEE

DEED OF TRUST REFERENCE :

Dated: 08/16/2011 Recorded: 08/22/2011Instrument #:

201108220124Book # : N/A Page # : N/A

Trustor : LUIS J CARRILLO, A MARRIED MAN, AS HIS SEPARATE ESTATE

Original Beneficiary : STERLING SAVINGS BANK

Trustees : GUARDIAN NORTHWEST TITLE County : SKAGIT

: Washington : \$100,001.00 Amount ASSESSOR'S/TaxID No.: .

WHEREAS, MORTGAGE ELECTRONIC REGISTRATION SYSTEMS, INC. P.O. BOX 2026, FLINT MI. 48501-2026, is the holder of the Deed of Trust herein above described.

AND, being the present beneficiary under said Deed of Trust, acknowledges that all sums and obligations secured by said Deed of Trust have been fully paid or satisfied.

AND desires to substitute a new Trustee under said Deed of Trust in the place or stead of STERLING SAVINGS BANK.

NOW THEREFORE, the undersigned hereby substitutes, TRUSTEE SERVICES, INC. whose address is P.O. BOX 2980 SILVERDALE, WA 98383, as Trustee under said Deed of Trust and further instructs said Trustee to reconvey the estate now held under said Deed of Trust to the person or persons legally entitled thereto.

MORTGAGE ELECTRONIC REGISTRATION SYSTEMS, INC. AS SOLE NOMINEE FOR THE BENEFICIAL OWNER FOR STERLING SAVINGS BANK

On June 2013

ELIZABE

LUEVANO

SECRET

Carlton-Oliva Assistant

creta

STATE OF Illinois COUNTY OF Lake

ON 1-13, before me, SHERRI R PIESCHE, a Notary Public in and for the County of Lake, State of Illinois, personally appeared ELIZABETH LUEVANO ASSISTANT SECRETARY & Janice Carlton-Oliva Assistant Secretary of MORTGAGE ELECTRONIC REGISTRATION SYSTEMS, INC. AS SOLE NOMINEE FOR THE BENEFICIAL OWNER FOR STERLING SAVINGS BANK, personally known to me (or 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, and that by his/her/their signature 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

SHERRI R PIESCHE

Notary Expires: 11/08/2015





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