6552	25	-02-93A10:01	· - · -	STATE OF OF	22	V	/ol <u>m93</u> page 18936
	KEC	ORDING REQUESTED B	Y	Filed for recor	d at request of:	V	OIJN93 Page
	Rex Wa 18920	EN RECORDED MAIL TO 11 Rock Springs ia CA 92345	Rd	on this 2n at 10:0 in Vol. M Evelyn	d day of 1 o'clock _ 93 of _Mor	A regage	
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ir C s(n Book Moon On One One One One One One One One One	regon Mornia having receives said Deed of Trus	f Official Rec ived from Ber t have been f ed to said Tr	cords in the Of neficiary thereu fully paid, and custee for cance	fice of the Reco inder a request t said Deed of T ellation, hereby	rder o to reco rust a recon	onvey reciting that all sums and Note or Notes secured veys, without warranty, to
l l							thereunto duly authorized.
	NATIONAL REALT a California corporati By: Tolucio Patricia A Its: Vice Presi						tadnand Ferdinand
CALIFOR	RNIA AL	L'PURPOSE AC	KNOWIER				٠.
State of	Cal:	ifornia Angeles before me,	William MAME, TITLE OF C	V. Hernan	dez DE, NOTARY PUBLIC ¹		OPTIONAL SECTION CAPACITY CLAIMED BY SIGNER Though statute does not require the Notary to fill in the data below, doing so may prove invaluable to persons relying on the document. INDIVIDUAL CORPORATE OFFICER(S) Vice President TITLE(S)
County On ☐ persons ☑ perso	WII NOT	oreicial seal. LIAM V. HERNANDEZ ARY PUBLIC-CALFORNIA ARY PUBLIC-CALFORNIA PINCIPAL OFFICE IN SOS ANGELES COUNTY OF Sept. 29, 1995	roved to me o to be the subscribe knowledg the sam capacity signature or the ei person(s)	on the basis of see person(s) which to the within ed to me that the in his ther (ies), and the (s) on the instructity upon be	ose name(s)(is instrument and eshether authorist by his/fe/timent the persor half of which dithe instrument	Yaxe ac- uted zed hax(r h(s), the	PARTNER(S) LIMITED GENERAL TRUSTEE(S) GUARDIAN CONSERVATOR OTHER: SIGNER IS REPRESENTING: NAME OF PERSON(S) OR ENTITY(IES) National Realty Escrow

THIS CERTIFICATE MUST BE ATTACHED TO THE DOCUMENT DESCRIBED AT RIGHT:

Though the data requested here is not required by law, it could prevent fraudulent reattachment of this form.

SIGNATURE OF NOTARY OPTIONAL SECTION TITLE OR TYPE OF DOCUMENT Full Reconveyance NUMBER OF PAGES_ 1 DATE OF DOCUMENT SIGNER(S) OTHER THAN NAMED ABOVE.

No 5193