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APPOINTMENT OF 54-393 SUCCESSOR TRUSTEE		<b>2006-015656</b> Klamath County, 6	Oregon
RE: Trust Deed from  ASPEN TITLES LESCRON		000002912006001	56560020021
TO Grantor  FIRST AMERICAN TITLE  404 MBIN  KLAM ATH FALLS DR 97601  Trustee	SPACE RESE FOR RE	08/03/2006 11:40:22 AM	Fee: \$26.00
After seconding, return to (Name, Address, Zip):  (1) ICHAGE E LOW IV.  (573) SW OBERS LW SITERWIND OR 9 1149  HOTT BY HOTE  Harrows Mrs. LLO41			
15t 010-370 KNOW ALL BY THESE PRESENTS that is the grant	CHAR E (	DWG /UG	v
is the grant	e and $DT$	Services INC	
recorded on 4/21/2004 is the benefici	ary under that	certain trust deed dated	
recorded on 4/21/2004	in book/reel/vo	olume No. Ma4	at page 2529/, and/or as
fee/file/instrument/microfilm/reception No The undersigned, who is the present beneficiary u			
			<u>-</u>
NOW, THEREFORE, the undersigned hereby app YOY MAIN ST, KLAMATH FALLS	ooms 2_22.22.	111167-010	whose address is
under the trust deed, to have all the power of the original In construing this instrument, and whenever the construint this instrument, and the con	trustee, effectiontext so requiciery has executly an officer or	ve immediately.* res, the singular include ited this document. If th	es the plural.  e undersigned is a corporation, it has orized to do so by order of its board  PRESIPENT
STATE OF CALLED A, County  This instrument was act  by	Notary	71010 III0 OII	ad My

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## ALL-PURPOSE ACKNOWLEDGMENT

State of California  County of	ss.
On 7/27/04 before me, personally appeared William	COSSONARY L. LONG. V. Tropp (MOTARY)
CASSANDRA L. LONG Comm. #1576249 NOTARY PUBLIC-CALIFORNIA Orange County My Comm. Expires June 3, 2009	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 signatures(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.
	NOIARY SSIGNATURE - MY
	NFORMATION —
	NFORMATION — Tr., it could prevent fraudulent attachment of this acknowl-
The information below is not required by law. Howeve	
The information below is not required by law. Howeve edgment to an unauthorized document.	r, it could prevent fraudulent attachment of this acknowl-
The information below is not required by law. Howeve edgment to an unauthorized document.  CAPACITY CLAIMED BY SIGNER (PRINCIPAL)  INDIVIDUAL CORPORATE OFFICER  THUE(S)  PARTNER(S)  ATTORNEY IN FACT	r, it could prevent fraudulent attachment of this acknowl- DESCRIPTION OF ATTACHED DOCUMENT
The information below is not required by law. Howeve edgment to an unauthorized document.  CAPACITY CLAIMED BY SIGNER (PRINCIPAL)  INDIVIDUAL CORPORATE OFFICER  THUE(S)	TITLE OR TYPE OF DOCUMENT
The information below is not required by law. Howeve edgment to an unauthorized document.  CAPACITY CLAIMED BY SIGNER (PRINCIPAL)  INDIVIDUAL CORPORATE OFFICER  PARTNER(S) ATTORNEY IN FACTI TRUSTEE(S) GUARDIAN/CONSERVATOR	TITLE OR TYPE OF DOCUMENT  NUMBER OF PAGES