APPOINTMENT OF SUCCESSOR TRUSTEE

MT 89080-DS

2010-014304 Klamath County, Oregon



12/17/2010 03:18:02 PM

Fee: \$42.00

Pursuant to ORS 86 790 (3) the present beneficiary hereby appoints AMERITITLE as successor trustee of the following designated Trust Deed, said Successor Trustee having all the powers of the original Trustee, effective herewith:

GRANTOR: MICHELLE E. MCCLELLAN-ALT() AND DAMRON W. ALTO

TRUSTEE: ASPEN TITLE AND ESCROW INC.

BENEFICIARY: AUBREY DALE HARRIS AND GINGER LEE HARRIS, AS TO AN UNDIVIDED ½ INTEREST AND LEIGH R. GRASS AND DORIS LEE GRASS, TRUSTEE OR THEIR SUCCESSORS IN TRUST UNDER GRASS LOVING TRUST

DATED APRIL 13, 1995, AS TO AN UNDIVIDED ½ INTEREST

DATED: MARCH 7, 1997

RECORDED: MARCH 10, 1997

Volume M97, Page 6990, Microfilm Records of Klamath County, Oregon

Dated: 12/7/16	2		
	Si O	F THE GRASS L	ESSOR TRUSTEE OVING TRUST
		y: ATED APRIL 13	104
State of			
State of) ss.)		
On	, 2010, before n	ne, a Notary Publi , known to me,	c, personally appeared or proved to me on the
basis of satisfactory evidence within instrument and acknow authorized capacity and that the entity upon behalf of wh	e, to be the person owledged to me that by his/her/their sign	(s) whose name(s) at he/she/they execution (s) on the i) is/are subscribed to the outed the same in his nstrument, the person o
WITNESS MY HAND AND OF	FICIAL SEAL.	SEE A	MACHED
Notary Public. State of		-	

After recording return to:

My commission expires

CALIFORNIA ALL-PURPOSE CERTIFICATE OF ACKNOWLEDGMENT

- 010 - 2 ND	bolder astronaulia
On <u>DIC 7, 2010</u> before me, M · A	(Here insert name and title of the officer)
personally appeared Rmad Bradle	y Dund
who proved to me on the basis of satisfactory evid the within instrument and acknowledged to me that	ence to be the person(s) whose name(s) is/are subscribed to at he/she/they executed the same in his/her/their authorized on the instrument the person(s), or the entity upon behalf of
I certify under PENALTY OF PERJURY under the is true and correct.	e laws of the State of California that the foregoing paragraph
WITNESS my hand and official seal.	Commission # 1884511 Notary Public - California Riverside County
M. Angust Notary Public Wignature of Notary Public	My Comm. Expires Apr 25, 2014 (Notary Seal)
	· · · · · · · · · · · · · · · · · · ·
ADDITIONAL OF	PTIONAL INFORMATION
DESCRIPTION OF THE ATTACHED DOCUMENT	INSTRUCTIONS FOR COMPLETING THIS FORM Any acknowledgment completed in California must contain verhiage exactly as appears above in the notary section or a separate acknowledgment form must be properly completed and attached to that document. The only exception is if a document is to be recorded outside of California. In such instances, any alternative acknowledgment verbiage as may be printed on such a document so long as the
(Title or description of attached document)	verbiage does not require the notary to do something that is illegal for a notary in California (i.e. certifying the authorized capacity of the signer). Please check the document carefully for proper notarial wording and attach this form if required.
(Title or description of attached document continued)	
Number of Pages Document Date 12710	 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
(Additional information)	 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 notarization.
CAPACITY CLAIMED BY THE SIGNER	 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
☐ Individual (s)	information may lead to rejection of document recording.
☐ Corporate Officer	The notary seal impression must be clear and photographically reproducible.
(Title)	impression must not cover text or lines. If seal impression smudges, re-seal if a sufficient area permits, otherwise complete a different acknowledgment form.
Partner(s)	 Signature of the notary public must match the signature on file with the office of
Attorney-in-Fact	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.

corporate officer, indicate the title (i.e. CEO, CFO, Secretary).

· Securely attach this document to the signed document

Indicate the capacity claimed by the signer. If the claimed capacity is a

Trustee(s)

Other

State of California

County of RIVERSIDE