

Recording Requested By:
HOMECOMINGS FINANCIAL, LLC

When Recorded Return To:

BARNES BARNES
247 ELDORADO BLVD.
KLAMATH FALLS, OR 97601

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SUBSTITUTION OF TRUSTEE & DEED OF RECONVEYANCE

HOMECOMINGS FINANCIAL, LLC #:0010705275 "BARNES" Lender ID:SBO/PO 8/14/01 Klamath, Oregon PIF: Deutsche Bank Trust Company Americas, as Trustee fka Bankers Trust Company, as Trustee is the present beneficiary of that certain Deed of Trust, Dated: 12/04/1992 made by BARNES LOVING TRUST DATED NOVEMBER 29, 1990 as the original Grantor(s), to ASPEN TITLE & ESCROW INC, as the original Trustee, for the benefit of JACKSON COUNTY FEDERAL BANK, as the original beneficiary, which Deed of Trust was recorded on 12/07/1992 in Book/Reel/Liber: M92 Page/Folio: 28881 as Instrument No.: N/A , in the official records of Klamath County, Oregon

Property Address: 247 ELDORADO BLVD., KLAMATH FALLS, OR 97601

Deutsche Bank Trust Company Americas, as Trustee fka Bankers Trust Company, as Trustee HEREBY SUBSTITUTES FIRST AMERICAN TITLE INSURANCE COMPANY, Trustee in lieu of the above named Trustee under said Deed of Trust.

FIRST AMERICAN TITLE INSURANCE COMPANY hereby accepts said appointments as Trustee under said Deed of Trust and, as Successor Trustee, pursuant to the request of said Owner and Holder and in accordance with the provisions of said Deed of Trust does hereby reconvey, without any covenant or warranty express or implied, to the person or persons legally entitled thereto, all of the estate held by the undersigned under said Deed of Trust.

IN WITNESS WHEREOF, the present beneficiary and FIRST AMERICAN TITLE INSURANCE COMPANY have caused these presents to be executed by their duly authorized officers on the dates below written.

Deutsche Bank Trust Company Americas,
as Trustee fka Bankers Trust Company,
as Trustee

On _____

By: Karlene G. Benvenuto
Karlene Benvenuto
Assistant Vice President

By FIRST AMERICAN TITLE INSURANCE
COMPANY as Trustee

On 6-6-14

By: Angela Venner
BY: **Angela Venner**
Authorized Signatory

STATE OF California
COUNTY OF Orange

On _____, 2013, before me, _____, a Notary Public in and for said state, personally appeared _____, who proved to me on the basis of satisfactory evidence to be the person whose name is subscribed to the within instrument and acknowledged to me that he/she executed that same in his/her authorized capacity, and that by his/her signature on the instrument the entity upon behalf of which the person acted and executed the instrument. I certify under PENALTY OF PERJURY under the laws of the State of California that the foregoing paragraph is true and correct.

WITNESS my hand and official seal,

PLEASE SEE ATTACHED

Notary Expires: / /

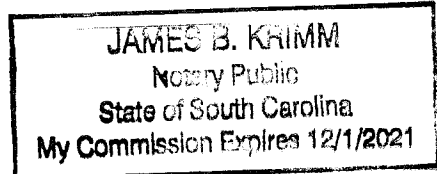
(This area for notarial seal)

STATE OF South Carolina
COUNTY OF Lexington

On this 6 day of June, 2014 before me personally appeared Angela Venner
Authorized Signatory of First American Title Insurance Company who provided satisfactory evidence of his/her
identification to be the person whose name is subscribed to this instrument, and he/she acknowledged that he/she
executed the foregoing instrument.

WITNESS my hand and official seal,

James B Krimm
Notary Public State of SC
Notary Expires 12/1/21



(This area for notarial seal)

CALIFORNIA ALL-PURPOSE CERTIFICATE OF ACKNOWLEDGMENT

State of California

County of ORANGE

On MAY 30, 2014 before me, JEROME JACKSON, Notary Public
(Here insert name and title of the officer)

personally appeared KARLENE BENVENUTO

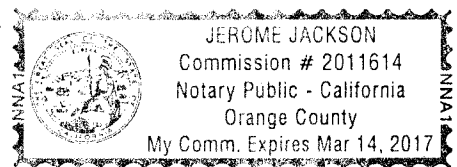
who proved to me on the basis of satisfactory evidence to be the person(s) whose name(s) is are subscribed to the within instrument and acknowledged to me that he/she they executed the same in his/her their authorized capacity(ies), and that by his/her their signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument.

I certify under PENALTY OF PERJURY under the laws of the State of California that the foregoing paragraph is true and correct.

WITNESS my hand and official seal.

[Signature]
Signature of Notary Public

(Notary Seal)



ADDITIONAL OPTIONAL INFORMATION

INSTRUCTIONS FOR COMPLETING THIS FORM

Any acknowledgment completed in California must contain verbiage 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 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.

- 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 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.
- 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 information may lead to rejection of document recording.
- The notary seal impression must be clear and photographically reproducible. Impression must not cover text or lines. If seal impression smudges, re-seal if a sufficient area permits, otherwise complete a different acknowledgment form.
- Signature of the notary public must match the signature on file with the office of 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.
 - ❖ Indicate the capacity claimed by the signer. If the claimed capacity is a corporate officer, indicate the title (i.e. CEO, CFO, Secretary).
- Securely attach this document to the signed document

DESCRIPTION OF THE ATTACHED DOCUMENT

Sub of Reconveyance
(Title or description of attached document)

(Title or description of attached document continued)

Number of Pages _____ Document Date _____

247 E. Klamath Blvd, Klamath Falls
(Additional information)

CAPACITY CLAIMED BY THE SIGNER

- ☐ Individual (s)
☐ Corporate Officer

(Title)

- ☐ Partner(s)
☐ Attorney-in-Fact
☐ Trustee(s)
☐ Other _____