

2015-007123

Klamath County, Oregon

07/01/2015 09:56:04 AM

Fee: \$47.00

When recorded return to:
Robinson Tait, P.S.
710 Second Avenue, Suite 710
Seattle, WA 98104

APPOINTMENT OF SUCCESSOR TRUSTEE

KNOW ALL MEN BY THESE PRESENTS THAT RELATIVE TO THAT CERTAIN DEED OF TRUST DESCRIBED AS FOLLOWS:

Dated: September 14, 2005
Recorded: September 21, 2005
Instrument No.: M05-64789
County: Klamath, Oregon
Trustor: TAMARA PIERCE and TROY PIERCE
Original Trustee: Amerititle
Original Beneficiary: Gateway Business Bank DBA Mission Hills Mortgage Bankers

8481552
THE UNDERSIGNED, Carrington Mortgage Services, LLC, as servicer and attorney in fact for Wells Fargo Bank N.A., as Trustee, for Carrington Mortgage Loan Trust, Series 2006-NC1 Asset-Backed Pass-Through Certificates, who is the present Beneficiary under the Trust Deed, hereby appoints Robinson Tait, P.S., whose address is 710 Second Avenue, Suite 710, Seattle, Washington 98104, as Successor Trustee under said trust deed, to have all the power of the Original Trustee, effective as of the date of execution of this document.

1ST AM
IN WITNESS THEREOF, the undersigned Beneficiary has executed this document. If the undersigned is a corporation, it has caused its corporate name to be signed and affixed hereto by its duly appointed officers.

DATED: 6/19/15

Carrington Mortgage Services, LLC, as servicer and attorney in fact for Wells Fargo Bank N.A., as Trustee, for Carrington Mortgage Loan Trust, Series 2006-NC1 Asset-Backed Pass-Through Certificates.

By: Tom Croft
(Name) Tom Croft, SVP of Default for Carrington Mortgage Services, LLC, Attorney in Fact

STATE OF _____)
) ss.
COUNTY OF _____)

On _____, before me, _____ personally appeared _____ personally known to me (or 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 the same in his/her authorized capacity and that by his/her signature on the instrument the person, or the entity upon behalf of which the person acted executed the instrument.

WITNESS my hand and official seal.

See Attached

NOTARY PUBLIC in and for the State of _____
_____, residing at _____
My commission expires: _____

A notary public or other officer completing this certificate verifies only the identity of the individual who signed the document, to which this certificate is attached, and not the truthfulness, accuracy, or validity of that document.

CALIFORNIA ALL – PURPOSE

CERTIFICATE OF ACKNOWLEDGMENT

State of California

County of Orange

On June 19, 2015 before me, **ELIZABETH GONZALES**, Notary Public, personally appeared, TOM CROFT, 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.

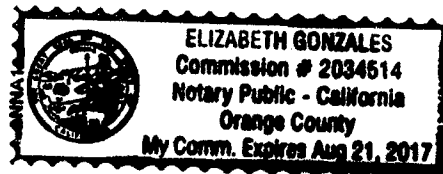
I certify under PENALTY OF PERJURY under the laws of the State of California that the foregoing paragraph is true and correct.

WITNESS my hand and official seal

Signature

[Handwritten Signature]

(Seal)



ADDITIONAL OPTIONAL INFORMATION

DESCRIPTION OF THE ATTACHED DOCUMENT

Appointment of
(Title or description of attached document)
Successor Trustee
(Title or description of attached document continued)

Number of Pages 1 Document Date 6/19/15

(Additional information)

CAPACITY CLAIMED BY THE SIGNER

- ☐ Individual (s)
☐ Corporate Officer
(Title)
☐ Partner(s)
☐ Attorney-in-Fact
☐ Trustee(s)
☐ Other _____

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