RECORDING REQUESTED BY:

F&A FEDERAL CREDIT UNION

AND WHEN RECORDED MAIL TO:

KENNETH C. KNOWLES JOAN K. KNOWLES 12844 OLD FORT RD KLAMATH FALLS, OR 97601 **2016-006139**Klamath County, Oregon

00487882304600064390020036

06/13/2016 08:41:13 AM

Fee: \$52.00

THIS SPACE FOR RECORDER'S USE ONLY

2070 L71 PR	SUBSTITUTION OF TRUST	EE and FULL RECONVEYANCE	
WHEREAS	KENNETH CLIFTON KNOWLES AN BY THE ENTIRETY	D JOAN KATHLEEN KNOWLES, AS TENANTS	
was the original Trustor, FIDELITY NATIONAL TITLE COMPANY OF CALIFORNIA			
was the original Trustee, and F&A Federal Credit Union was the original Beneficiary under that certain			
Deed of Trust	dated March 28, 2006 and	recorded on April 3, 2006	
in Bookn/a	Page n/a	Inst. No. <u>M06-06333</u>	
Official Records of KLAMATH County, Oregon, and			
WHEREAS, the undersigned Beneficiary desires to substitute as new Trustee under said Deed of Trust in			
place and stead of Title Insurance and Trust Company;			
NOW THEREFORE, the undersigned hereby substitutes (themselves, himself, herself) as Trustee under			
said Deed of Trust, and does hereby RECONVEY, without warranty to the person or persons legally entitled			
thereto, the est	tate now held thereunder.	F&A Federal Credit Union	
DATE: <u>May</u>	<u>23, 2016 </u>	Pamela S-Chiek, Assistant Treasurer BY: Aida Gutierrez, Assistant Treasurer	
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CIVIL CODE § 1189

CALIFORNIA ALL-PURPOSE ACKNOWLEDGMENT

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.			
State of California)			
County of LOS ANGELES)			
On 632016 before me, P. REYES, NOTARY PUBLIC			
Date Here Insert Name and Title of the Officer			
personally appeared PAMELA S. CHICK AND AIDA GUTIERREZ			
	Name(s) of Signer(s)		
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.			
of	ertify under PENALTY OF PERJURY under the laws the State of California that the foregoing paragraph true and correct.		
Commission # 2056691 Notary Public - California	TNESS my hand and official seal.		
My Comm. Expires Feb 1, 2018 Place Notary Seal Above	Signa(ure of Notary Public		
Though this section is optional, completing this information can deter alteration of the document or fraudulent reattachment of this form to an unintended document.			
Description of Attached Document SUBSTITUTION OF TRUSTEE Title or Type of Document: AND FULL RECONVEYANCE Document Date: 52310 Number of Pages: 1 Signer(s) Other Than Named Above: N/A			
Capacity(ies) Claimed by Signer(s) Signer's Name: Corporate Officer — Title(s): Partner — Limited General Individual Attorney in Fact Trustee Quardian or Conservator Other: Signer Is Representing:	Signer's Name: Corporate Officer — Title(s): Partner — Limited General Individual Attorney in Fact Trustee Guardian or Conservator Other: Signer Is Representing:		