

2023-000409

Klamath County, Oregon

01/20/2023 10:56:01 AM

Fee: \$107.00

RE: Deed of Trust From
CHARLOTTE A BURT

Grantor

To

**QUALITY LOAN SERVICE CORPORATION F/K/A
QUALITY LOAN SERVICE CORPORATION OF
WASHINGTON**

Successor Trustee

After recording return to (Name, Address, Zip):

**Quality Loan Service Corporation
f/k/a Quality Loan Service Corporation of Washington
2763 Camino Del Rio South
San Diego, CA 92108**

Appointment of Successor Trustee

KNOW ALL MEN BY THESE PRESENTS: whereas **CHARLOTTE A BURT** was the original grantor, **FIDELITY NATIONAL TITLE INS CO** was the original trustee, and **WELLS FARGO BANK, N.A** was the original beneficiary under that certain deed of trust dated **5/23/2008**, recorded on **5/29/2008** as fee/file/instrument/microfilm/reception number **2008-007858** of the records of **KLAMATH County, OR**.

WHEREAS the undersigned, who is the present beneficiary under the deed of trust, desires to appoint a new trustee in the place and stead of the original trustee named above.

NOW, THEREFORE, the undersigned hereby appoints **QUALITY LOAN SERVICE CORPORATION F/K/A QUALITY LOAN SERVICE CORPORATION OF WASHINGTON** as successor trustee under the deed of trust, to have all the power of the original trustee, effective immediately.

IN WITNESS WHEREOF, the undersigned beneficiary has executed this document. If the undersigned is a corporation, it has caused its name to be signed and its seal, if any, affixed by an officer or other person duly authorized to do so by order of its board of directors.

TS No: **OR-22-913057-SW**

Dated: 1-19-2023

PHH Mortgage Corporation as Servicer for Mortgage Assets Management, LLC

Debbie Best

By: Debbie Best

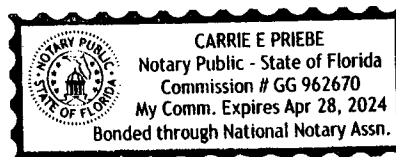
Title: Contract Management Coordinator

STATE OF FLORIDA

COUNTY OF PALM BEACH

The foregoing instrument was acknowledged before me by means of ☒ physical presence or ☐ online notarization, this 19 day of JAN. 2023, by Debbie Best as Contract Management Coordinator for PHH Mortgage Corporation as Servicer for Mortgage Assets Management, LLC, who is personally known to me or who has produced _____ as identification.

Carrie E. Priebe
Signature of Notary Public



Name of Notary Public:

Carrie E. Priebe

Notary Commission Expiration Date: _____

Personally known: ☒

OR Produced Identification: _____

Type of Identification Produced: _____

TS No: OR-22-913057-SW