

After Recording Return To:  
**Affinia Default Services, LLC**  
320 120<sup>th</sup> Ave NE Suite 203B  
Bellevue, WA 98005  
File Number: 24-00502OR

Assessor's Tax Parcel No. / Map No.: 3809-029AC-04100  
Property Address: 1926 Sargent Ave, Klamath Falls, OR 97601

**SUBSTITUTION OF TRUSTEE**

WHEREAS the undersigned desires to appoint **Affinia Default Services, LLC**, whose address is 10151 S.E. Sunnyside Road, Suite 490, Clackamas, OR 97015, as "Successor Trustee" under the Deed of Trust; and

WHEREAS Charlene Clymer was the original Grantor(s), and Mortgage Electronic Registration Systems, Inc., as designated nominee for BCK Capital Inc., an Oregon Corporation, beneficiary of the security instrument, its successors and assigns was the original Beneficiary of the Deed of Trust securing the amount of \$126,262.00, dated May 8, 2019, recorded on May 9, 2019, as Instrument No. 2019-005027, in the records of Klamath County, Oregon ("Deed of Trust"); and

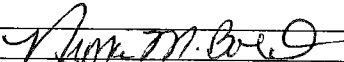
WHEREAS the undersigned, is the present Beneficiary of the Deed of Trust, pursuant to that certain Assignment of Deed of Trust recorded on May 10, 2024, as Instrument No. 2024-003669, in the records of Klamath County, Oregon ("Deed of Trust");

NOW THEREFORE, the undersigned, Flagstar Bank, N.A. hereby appoints Affinia Default Services, LLC as "Successor Trustee" under the Deed of Trust, and the Successor Trustee shall have all the powers of the original trustee, effective immediately and pursuant to ORS 86.713 (3).

NOTARY ON FOLLOWING PAGE

Flagstar Bank, N.A.

DATED: 07/01/2024

By:   
Name: Nina M Bobo  
Title: Loan Administration Analyst

STATE OF Michigan )  
COUNTY OF Oakland )

I certify that I know or have satisfactory evidence that Nina M Bobo is the person who appeared before me, and said person acknowledged that he/she signed this instrument and on oath stated that he/she was authorized to execute the instrument and acknowledged it as Loan Administration Analyst of Flagstar Bank NA to be the free and voluntary act of such party for the uses and purposes mentioned in the instrument.

DATED: 07/01/2024.



Print Name Allyson G Bonilla  
Notary Public in and for the State of Michigan  
My Commission/Appointment expires \_\_\_\_\_

ALLYSON G. BONILLA  
NOTARY PUBLIC, STATE OF MI  
COUNTY OF OAKLAND  
MY COMMISSION EXPIRES Mar 14, 2027  
ACTING IN COUNTY OF

**Oakland**