

**2024-009180**

**Klamath County, Oregon**

10/22/2024 08:59:01 AM

Fee: \$87.00

RE: Deed of Trust From  
**STEVEN HOFFMANN AND KATY R. KEMP, WITH  
RIGHTS OF SURVIVORSHIP**

Grantor

To

**QUALITY LOAN SERVICE CORPORATION**

Successor Trustee

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

**Quality Loan Service Corporation**

**2763 Camino Del Rio South**

**San Diego, CA 92108**

### **Appointment of Successor Trustee**

KNOW ALL MEN BY THESE PRESENTS: whereas **STEVEN HOFFMANN AND KATY R. KEMP, WITH RIGHTS OF SURVIVORSHIP** was the original grantor, **AMERITITLE** was the original trustee, and **MORTGAGE ELECTRONIC REGISTRATION SYSTEMS, INC. ("MERS")**, AS DESIGNATED **NOMINEE FOR SIERRA PACIFIC MORTGAGE COMPANY, INC., ITS SUCCESSORS AND ASSIGNS** was the original beneficiary under that certain deed of trust dated **4/20/2021**, recorded on **4/27/2021** as fee/file/instrument/microfilm/reception number **2021-006557** 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** as successor trustee under the deed of trust, to have all the power of the original trustee, effective immediately.

TS No: **OR-24-999278-SW**

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.

Dated: October 17, 2024

PHH Mortgage Corporation



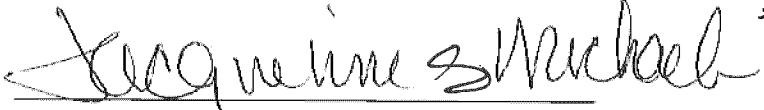
By: Oscar Giraldo

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 17 day of October 2024, by Oscar Giraldo as Contract Management Coordinator for PHH Mortgage Corporation, who is personally known to me or who has produced \_\_\_\_\_ as identification.



Signature of Notary Public

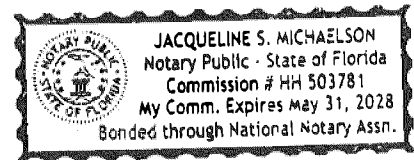
Name of Notary Public: Jacqueline S. Michaelson

Notary Commission Expiration Date: \_\_\_\_\_

Personally known: X

OR Produced Identification: \_\_\_\_\_

Type of Identification Produced: N/A



TS No: **OR-24-999278-SW**