

2025-002898

Klamath County, Oregon

04/21/2025 08:28:01 AM

Fee: \$97.00

RETURN TO: C. Riggsby
Orion Financial Group, Inc.
2860 Exchange Blvd. # 100
Southlake TX 76092

SUBSTITUTION OF TRUSTEE AND FULL RECONVEYANCE

WHEREAS, DALE LEONARD FARIES AND HELEN FARIES, HUSBAND AND WIFE AS JOINT TENANTS WITH RIGHT OF SURVIVORSHIP Property Address: 1544 SARGENT AVENUE, KLAMATH FALLS, OR 97601, was the original Trustor, SENIOR OFFICIAL WITH RESPONSIBILITY FOR SINGLE FAMILY MORTGAGE INSURANCE PROGRAMS IN THE DEPARTMENT OF HOUSING AND URBAN DEVELOPMENT FIELD OFFICE WITH JURISDICTION OVER THE PROPERTY DESCRIBED BELOW, OR A DESIGNEE OF THAT OFFICIAL, A Corporation, was the original Trustee, and SECRETARY OF HOUSING AND URBAN DEVELOPMENT, was the original Beneficiary, under that certain Deed of Trust dated 6/23/2009, and recorded on July 6, 2009, as Instrument 2009-009179 of the Official Records of Klamath County, Oregon, and WHEREAS, the undersigned SECRETARY OF HOUSING AND URBAN DEVELOPMENT whose address is, 451 Seventh Street SW, Washington DC 20410 is the present Beneficiary under said Deed of Trust, and WHEREAS, the undersigned desires to substitute a new Trustee under said Deed of Trust in the place and stead of SENIOR OFFICIAL WITH RESPONSIBILITY FOR SINGLE FAMILY MORTGAGE INSURANCE PROGRAMS IN THE DEPARTMENT OF HOUSING AND URBAN DEVELOPMENT FIELD OFFICE WITH JURISDICTION OVER THE PROPERTY DESCRIBED BELOW, OR A DESIGNEE OF THAT OFFICIAL, A Corporation, the original Trustee thereunder, NOW, THEREFORE, the undersigned hereby substitutes Journie D. Pinson, Vice President of Nationwide Escrow Services, Inc., as Trustee under said Deed of Trust, and As substitute Trustee, DOES HEREBY RECONVEY to the person or persons legally entitled thereto, without warranty, all the estate, title, and interest acquired by Trustee under said Deed of Trust. The land referred to in said Deed of Trust is situated in the State of Oregon, County of Klamath.

Date: 4-10-25.

Nationwide Escrow Services, Inc.,
an Oregon Domestic Business Corporation

SECRETARY OF HOUSING AND URBAN DEVELOPMENT



Journie D. Pinson, Vice President

By:



Vanessa Garnica, Manager, Loss Mitigation
Carrington Mortgage Services, LLC Attorney In Fact

State of _____

County of _____



On _____ before me, a Notary Public, in and for said county and state, personally appeared _____, , for SECRETARY OF HOUSING AND URBAN DEVELOPMENT , (known to me) (or proved to me on the basis of satisfactory evidence) to be the person who executed the within instrument on behalf of the corporation therein named, and he/she acknowledged to me that such corporation executed the same, and that he/she subscribed the name of said corporation thereto on its behalf. In Witness Whereof, I have hereunto set my hand and affixed my official seal the day and year in this certificate first above written.

SEE ATTACHED

Notary Public, _____
My Commission Expires: _____

SEE ATTACHED

OR Klamath

7000333755
CMS/RLS/FBC 2025-1 CLOSED

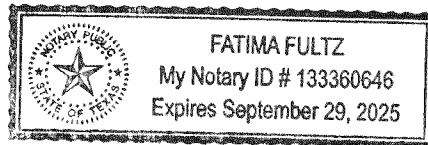
RETURN TO: C. Riggsby
Orion Financial Group, Inc.
2860 Exchange Blvd. # 100
Southlake TX 76092

State of TX County of Tarrant

On 4-15-25, before me, a Notary Public, in and for said county and state, personally appeared Journie D. Pinson, Vice President of Nationwide Escrow Services, Inc., Substitute Trustee for SENIOR OFFICIAL WITH RESPONSIBILITY FOR SINGLE FAMILY MORTGAGE INSURANCE PROGRAMS IN THE DEPARTMENT OF HOUSING AND URBAN DEVELOPMENT FIELD OFFICE WITH JURISDICTION OVER THE PROPERTY DESCRIBED BELOW, OR A DESIGNEE OF THAT OFFICIAL, (known to me) (or proved to me on the basis of satisfactory evidence) to be the person who executed the within instrument, and he/she acknowledged to me that he/she executed the same. In Witness Whereof, I have hereunto set my hand and affixed my official seal the day and year in this certificate first above written.

F. Fultz

Notary Public, Fatima Fultz
My Commission Expires: 9-29-25



CALIFORNIA ALL-PURPOSE CERTIFICATE OF ACKNOWLEDGMENT

A notary public or other office 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 }

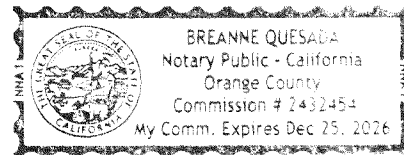
County of Orange }

On 4-10-2025 before me, **BREANNE QUESADA** **NOTARY PUBLIC.**
(Here insert name and title of the officer)

personally appeared **VANESSA GARNICA**
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.



Notary Public Signature **BREANNE QUESADA**

(Notary Public Seal)

ADDITIONAL OPTIONAL INFORMATION

DESCRIPTION OF THE ATTACHED DOCUMENT

(Title or description of attached document)

(Title or description of attached document continued)

Number of Pages _____ Document Date _____

CAPACITY CLAIMED BY THE SIGNER

- ☐ Individual(s)
☐ Corporate Officer

(Title)

- ☒ Partner(s)
☐ Attorney-in-Fact
☐ Trustee(s)
☐ Other _____

INSTRUCTIONS FOR COMPLETING THIS FORM

This form complies with current California statutes regarding notary wording and, if needed, should be completed and attached to the document. Acknowledgments from other states may be completed for documents being sent to that state so long as the wording does not require the California notary to violate California notary law.

- 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 with a staple



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