| RECORDING REQUEST | ED BY: | | | |
|---|--|-----------|--------------------------------|---------------------------|
| AND WHEN RECORDED MAIL TO: | | | | |
| APN: | | | | |
| | | SPACE A | BOVE THIS LINE IS FOR REG | CORDER'S USE |
| SUBST | ITUTION OF TRUST | EE ANI | FULL RECONVEYA | NCE |
| WHEREAS, | was the original | | or; and was the original | |
| Trustee; and | | | | |
| | , recorded on | | , as Instrument I | No, of |
| Official Records of | Cc | ounty, Ca | lifornia, and affecting that p | roperty more particularly |
| described as follows: | | | | |
| WHEREAS, the undersigned is Trustee under said Deed of Tru NOW, THEREFORE, the under Trust and does hereby RECON Estate now held thereunder. Dated: | st in place and instead of signed hereby substitutes VEY, WITHOUT WARRA | S | as Tro | ustee under said Deed of |
| STATE OF CALIFORNIA COUNTY OF | | ss. | | |
| On | before me | | Beneficiary and Successor | r Trustee |
| Notary Public, personally appeared | :d | | | |
| | | | Beneficiary and Successor | r Trustee |
| who proved to me on the basis of the person(s) whose name(s) is/a instrument and acknowledged to rexecuted the same in his/her/their and that by his/her/their signature person(s), or the entity upon behalacted, executed the instrument. | re subscribed to the within me that he/she/they authorized capacity(ies) (s) on the instrument the llf of which the person(s), | | | |
| I certify under PENALTY OF PER the State of California that the fore and correct. | egoing paragraph is true | | | |
| WITNESS my hand and official se | al. | | | |
| SignatureSignature of No | | | | |