## **RECORDING REQUESTED BY**

AND WHEN RECORDED MAIL TO

NAME

ADDRESS

CITY STATE & ZIP

TITLE ORDER NO.	ESCROW NO.	APN NO.	
SUBSTITUTION OF TRUSTEE AND FULL RECONVEYANCE			
WHEREAS			
was the original Trustor,			
the original Trustee, and			
the Beneficiary, under that certa	in Deed of Trust dated	and recorded on	· · · · · · · · · · · · · · · · · · ·
as Instrument No	, (	Official Records,	
County, State of California, and a	affecting the land described in s	aid Deed of Trust, and	
WHEREAS the undersig	ned Beneficiary desires to sul	bstitute a new Trustee under said Deed of Tru	ust in place

and stead of now therefore, the undersigned hereby substitutes (themselves, himself, herself) as Trustee under said Deed of Trust and does hereby reconvey, without warranty, to the person or persons legally entitled thereto, the Estate now held by him thereunder.

DATE: \_\_\_\_\_

Beneficiary Signature and Printed Name:

Beneficiary Signature and Printed Name:

A notary public or other officer 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 \_\_\_\_\_\_

On

\_\_\_\_\_before me,\_\_\_\_\_

Notary Public, personally appeared

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.

Signature (Seal)