RECORDING REQUESTED BY:

Chicago Default Services - NV

WHEN RECORDED MAIL TO:

National Default Servicing Corporation 2525 East Camelback Road, Suite 200

Phoenix, AZ 85016

NDSC File No. : 08-00545-WFR-NV

Loan No. 1010359

APN

: 1420-33-310-020

: 1180017587

DOC # 732376 11/03/2008 03:59PM Deputy: KE OFFICIAL RECORD Requested By DOUGLAS TITLE Douglas County - NV Ŕecorder Karen Ellison_ Fee: T: 0.00 14.00 BK-1108 PG-242 RPTT:



SUBSTITUTION OF TRUSTEE

H805926

WHEREAS, JAMES G. SELLERS AND JAMIE S. SELLERS, HUSBAND AND WIFE AS JOINT TENANTS was the original Trustor(s), WELLS FARGO FINANCIAL NEVADA 2, INC. was the original Trustee and WELLS FARGO FINANCIAL NEVADA 2, INC. was the original Beneficiary under that certain Deed of Trust dated 01/11/2006 and recorded on 01/18/2006 as instrument No. 0665923 BK 0106 PG 5936 in Book, Page, of Official Records of DOUGLAS County, State of NV and

WHEREAS, the undersigned is the present beneficiary under the said Deed of Trust, and

WHEREAS, the undersigned desires to substitute a new Trustee under said Deed of Trust in place of said original Trustee, or Successor Trustee, thereunder, in the manner in said Deed of Trust provided,

NOW, THEREFORE, the undersigned hereby substitutes NATIONAL DEFAULT SERVICING CORPORATION, An Arizona Corporation, whose address is 2525 East Camelback Road, Suite 200, Phoenix, Arizona 85016, as Trustee under said Deed of Trust.

Whenever the context hereof requires, t	the masculine	e gender includes	the feminine	and/or neuter,	and the
singular number includes the plural.	The state of the s				
	Wells Far	go Finanoizii Neva	da 2, Inc.		
Dated: 8-29-08		SAFIX		<u></u>	
	By:	Darin Buel	e		
\ .\	Its:	VICE PRESID	DENT		
County of Polk		4,0 – ,			
State of /owa		1 1	•		
On $8-29$, 2008 , before for said State, personally appeared	re me, <u>5/</u>	naron K Bu	nce	, a Notary	/ Public
for said State, personally appeared	Dani	n Bueltei	person	ally known to n	ne (or
proved to me on the basis of satisfactory e within instrument and acknowledged to me	evidence) to b	e the person (s) wh	ose nam e(s) is/	are subscribed	to the
capacity(ies), and that by his/her/their sign	iature (s) on th	ne instrument the p	erson(s), or the	entity upon be	half of
which the person(s) acted, executed the in-	strument. I ce	rtify under PENA			
that the foregoing is to	ac and contec	t.			
WITNESS my hand and official seal.		SHALL SH	ARON K. BUN	VCE {	

Signature Sharon K Bunce

Commission Number 749124≸ My Commission Expires September 27, 2010