

RECORDING REQUESTED BY:  
LSI Title Agency - FIS Default Solutions

AND WHEN RECORDED MAIL TO:  
Western Progressive, LLC  
P.O. Box 100029  
Kennesaw, GA 30156  
APN: 1420-07-812-011



100734643

SPACE ABOVE THIS LINE FOR RECORDER'S USE

TS No.: 2010-08290 55776058044

The undersigned hereby affirms that there is no Social Security number contained in this document.

**SUBSTITUTION OF TRUSTEE**

WHEREAS, MITCHELL MOYLE AND SHANNON A MOYLE, HUSBAND AND WIFE AS JOINT TENANTS was the original Trustor, WESTERN TITLE was the original Trustee, and IMPERIAL LENDING, LLC, A COLORADO CORPORATION was the original Beneficiary under that certain Deed of Trust dated 12/9/2005 and recorded on 12/15/2005 as Instrument No. 0663471, in book ---, page --- and rerecorded on --- as --- of Official Records of Douglas County, Nevada; and

WHEREAS, the undersigned 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 place and instead of said original Trustee, or Successor Trustee, thereunder, in the manner in said Deed of Trust provided,

NOW, THEREFORE, the undersigned hereby substitutes Western Progressive, LLC, P.O. Box 100029 Kennesaw, GA 30156 as Trustee under said Deed of Trust.

Whenever the context hereof so requires, the masculine gender includes the feminine and/or neuter, and the singular number includes the plural.

Dated: MARCH 24, 2011

HSBC Bank USA, N.A., as Trustee on behalf of ACE Securities Corp. Home Equity Loan Trust and for the registered holders of ACE Securities Corp. Home Equity Loan Trust, Series 2006-SD1, Asset Backed Pass-Through Certificates, By Ocwen Loan Servicing, LLC its attorney-in-fact

Letron Kelly, Contract Management Coordinator

State of Florida } ss.  
County of Palm Beach }

On 3.24.11 before me, Leell Goodman personally appeared Letron Kelly 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 Florida that the foregoing paragraph is true and correct.  
WITNESS my hand and official seal. (seal)

Signature

Leell Goodman



Notary Public State of Florida  
Lesli D Goodman  
My Commission EE025748  
Expires 09/13/2014