

APN# 1420-34-811-025

Recording Requested by:

Name: State Farm Bank, FSB
Address: One State Farm Plaza
City/State/Zip: Bloomington, IL 61710



When Recorded Mail to:

Name: RETURN TO:
Address: DRI TITLE & ESCROW
City/State/Zip: 13057 W CENTER RD STE #1
OMAHA, NE 68144

Mail Tax Statement to:

Name: Andrew D & Lisa G Hagen
Address: 1596 JOHNSON LN
City/State/Zip: MINDEN, NV 89423

Modification of Deed of Trust
(Title of Document)

Please complete Affirmation Statement below:

I the undersigned hereby affirm that the attached document, including any exhibits, hereby submitted for recording does not contain the social security number of any person or persons. (Per NRS 239B.030)

-OR-

I the undersigned hereby affirm that the attached document, including any exhibits, hereby submitted for recording does contain the social security number of a person or persons as required by law:

(State specific law)
Kim Braddock DRI Agent
Signature Title
Kim Braddock
Print Signature 1390414-804332

This page added to provide additional information required by NRS 111.312 Sections 1-2 and NRS 239B.030 Section 4.

This cover page must be typed or printed in black ink.

(Additional recording fee applies)



The undersigned hereby affirms that this document submitted for recording does not contain any personal information.

Assessor Parcel No(s): 1420-34-811-025

RECORDATION REQUESTED BY:

State Farm Bank, F.S.B.; NMLS Company ID 139716; One State Farm Plaza; Bloomington, IL 61710

WHEN RECORDED MAIL TO:

State Farm Bank, F.S.B., P O Box 5961, Madison, WI 57305-0961

SEND TAX NOTICES TO:

ANDREW D HAGEN and LISA G HAGEN, 1596 JOHNSON LN, MINDEN, NV 89423

FOR RECORDER'S USE ONLY

MODIFICATION OF DEED OF TRUST LM

THIS MODIFICATION OF DEED OF TRUST dated November 28, 2012, is made and executed between ANDREW D HAGEN and LISA G HAGEN; as Husband and Wife ("Grantor") and State Farm Bank, F.S.B., whose address is NMLS Company ID 139716, One State Farm Plaza, Bloomington, IL 61710 ("Lender").

DEED OF TRUST. Lender and Grantor have entered into a Deed of Trust dated December 22, 2005 (the "Deed of Trust") which has been recorded in DOUGLAS County, State of Nevada, as follows:

RECORDED IN THE AMOUNT OF \$80,000 ON 01/11/2006, AS DOCUMENT NUMBER 0665561 IN BOOK 0106 PAGE 03966 IN THE DOUGLAS COUNTY RECORDS.

REAL PROPERTY DESCRIPTION. The Deed of Trust covers the following described real property located in DOUGLAS County, State of Nevada:

ALL THAT REAL PROPERTY SITUATED IN THE COUNTY OF DOUGLAS STATE OF NEVADA, BOUNDED AND DESCRIBED AS:

LOT 9, AS SHOWN ON THE MAP OF EL RANCHO ESTATES, FILED FOR RECORD IN THE OFFICE OF THE COUNTY RECORDER OF DOUGLAS COUNTY, NEVADA, ON APRIL 23, 1962, AS DOCUMENT NO. 19910.

SUBJECT TO RESTRICTIONS, RESERVATIONS, EASEMENT, COVENANTS, OIL, GAS OR MINERAL RIGHTS OF RECORD, IF ANY.

The Real Property or its address is commonly known as 1596 JOHNSON LN, MINDEN, NV



**MODIFICATION OF DEED OF TRUST
(Continued)**

89423. The Real Property tax identification number is 1420-34-811-025.

MODIFICATION. Lender and Grantor hereby modify the Deed of Trust as follows:

EXTENDING THE MATURITY DATE TO 11/01/2022.


CONTINUING VALIDITY. Except as expressly modified above, the terms of the original Deed of Trust shall remain unchanged and in full force and effect. Consent by Lender to this Modification does not waive Lender's right to require strict performance of the Deed of Trust as changed above nor obligate Lender to make any future modifications. Nothing in this Modification shall constitute a satisfaction of the promissory note or other credit agreement secured by the Deed of Trust (the "Note"). It is the intention of Lender to retain as liable all parties to the Deed of Trust and all parties, makers and endorsers to the Note, including accommodation parties, unless a party is expressly released by Lender in writing. Any maker or endorser, including accommodation makers, shall not be released by virtue of this Modification. If any person who signed the original Deed of Trust does not sign this Modification, then all persons signing below acknowledge that this Modification is given conditionally, based on the representation to Lender that the non-signing person consents to the changes and provisions of this Modification or otherwise will not be released by it. This waiver applies not only to any initial extension or modification, but also to all such subsequent actions.

OCCUPANCY (TITLE). By signing this form, we acknowledge that the intent of our loan is to obtain financing which is, or will be, secured by a dwelling that we will use as our principal residence. If we are not already doing so, we will occupy this residence within 60 days after the closing of our loan.


We also recognize that if we do not inhabit the residence as we have agreed to, we may be in default. If that occurs, State Farm Bank, F.S.B. will have the right to recall our loan, and to demand the immediate payment of the full balance due, plus any other expenses incurred in this respect. (FREE TYPE FIELD)

GRANTOR ACKNOWLEDGES HAVING READ ALL THE PROVISIONS OF THIS MODIFICATION OF DEED OF TRUST AND GRANTOR AGREES TO ITS TERMS. THIS MODIFICATION OF DEED OF TRUST IS DATED NOVEMBER 28, 2012.

GRANTOR:

x 

ANDREW D HAGEN

x 

LISA G HAGEN



**MODIFICATION OF DEED OF TRUST
(Continued)**

LENDER:

STATE FARM BANK, F.S.B.

x Tanya Abshin
Authorized Officer Tanya Abshire

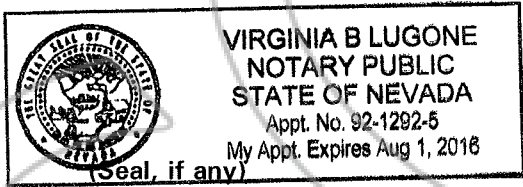
INDIVIDUAL ACKNOWLEDGMENT

STATE OF Nevada)

) SS

COUNTY OF Douglas)

This instrument was acknowledged before me on December 4, 2012 by ANDREW D HAGEN and LISA G HAGEN, as Husband and Wife.



Virginia B. Lugone
(Signature of notarial officer)

Notary Public in and for State of Nevada



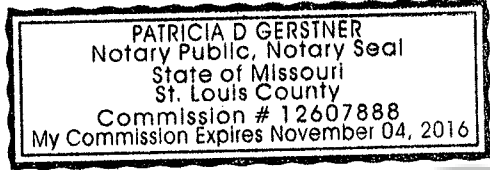
**MODIFICATION OF DEED OF TRUST
(Continued)**

LENDER ACKNOWLEDGMENT

STATE OF Missouri
COUNTY OF St Louis

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) SS
)

This instrument was acknowledged before me on 7th December 2012 by TANYA
ABSHIRE, BANK OFFICER of State Farm Bank, F.S.B., as designated
agent of State Farm Bank, F.S.B..



Patricia D Gerstner
PATRICIA D GERSTNER
(Signature of notarial officer)

Notary Public in and for State of Mo

(Seal, if any)