

DOUGLAS COUNTY, NV

2015-855925

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LSI TITLE AGENCY INC.

KAREN ELLISON, RECORDER

RECORDING REQUESTED BY:
ServiceLink, FNF's National Lender Platform

AND WHEN RECORDED MAIL TO:
Seaside Trustee Inc.
P.O. Box 752377
Las Vegas, NV 89136
APN: 1420-27-701-016

TS No.: 1306777NV Loan No.: 626210

SPACE ABOVE THIS LINE FOR RECORDER'S USE

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

SUBSTITUTION OF TRUSTEE

WHEREAS, J. Conrad Buedel Jr, and Carol A. Buedel, husband and wife as joint tenants was the original Trustor, ReconTrust Company, N.A. was the original Trustee, and Mortgage Electronic Registration Systems, Inc. (MERS) as nominee for Countrywide Home Loans, Inc. its successors and assigns was the original Beneficiary under that certain Deed of Trust dated 4/9/2007 and recorded on 4/13/2007 as Instrument No. 0699124, in book XX, page XX 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 Seaside Trustee Inc. , 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: 2/21/14

Bayview Loan Servicing, LLC. a Delaware Limited Liability Company as servicer for The Bank of New York Mellon fka The Bank of New York, as Trustee for the Certificateholders of CWALT, Inc., Alternative Loan Trust 2007-12T1, Mortgage Pass-Through Certificates, Series 2007-12T1

State of Florida } ss.
County of Broward }

Michael Parrish

On 2/21/14 before me, Gary Locke Notary Public, personally appeared Michael Parrish personally known to me (or 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.

WITNESS my hand and official seal.

Signature Gary Locke (Seal)

