DOUGLAS COUNTY, NV

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2015-856015

01/23/2015 03:18 PM

FIRST AMERICAN NATIONAL DEFAULT TITLE KAREN ELLISON, RECORDER

APN: 1318-15-611-053

When recorded mail to: Northwest Trustee Services, Inc. 1241 E. Dyer Road, Suite 250 Santa Ana, CA 92705

9202.20001

SUBSTITUTION OF TRUSTEE

8515766

WHEREAS, **Dryden Capital**, **Inc.** was the original Trustee under that certain Deed of Trust dated **03/11/14**, executed by **CLED**, **Inc.** to secure certain obligations in favor of **Jason Kristal**, an unmarried man as to an undivided **100.00%** interest as Beneficiary, recorded **03/28/14**, as Instrument No. **840308** of Official Records in the Office of the Recorder 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 Northwest Trustee Services, Inc., whose address is: 1241 E. Dyer Road, Suite 250 Santa Ana CA 92705, as Trustee under said Deed of Trust. The undersigned hereby affirms that there is no Social Security number contained in this document.

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

Jason Kristal	
(WSTAL	\ \
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State of) ss.	<u> </u>
On, before me,, who proved to basis of satisfactory evidence to be the person(s) whose name(s) is/are so the within instrument and acknowledged to me that he/she/they executed this/her/their authorized capacity(ies), and that by his/her/their signature instrument the person(s), or the entity upon behalf of which the persence executed the instrument.	subscribed to he same and re(s) on the
I certify under PENALTY OF PERJURY under the laws of the that the foregoing paragraph is true and correct.	ne state of
WITNESS my hand and official seal. Signature:	
/ /	

	<u> </u>	
A notary public or other officer completing this certific document to which this certificate is attached, and not t	ate verifies only the identity of the individual who signed the he truthfulness, accuracy, or validity of that document.	
State of California) County of Marin)		
On <u>Jan. 21, 2015</u> before me, <u>Oate</u>	Cindy Canta, Notary Public, Here Insert Name and Title of the Officer istal	
personally appeared	ristal	
	Name(s) of Signer(s)	
subscribed to the within instrument and acknow	r evidence to be the person(s) whose name(s) is/are reledged to me that he/she/they executed the same in his/her/their signature(s) on the instrument the person(s), cted, 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.	
CINDY CANTOR Commission # 1967276 Notary Public - California Marin County My Comm. Expires Jan 22, 2016	WITNESS my hand and official seal. Signature	
my cultur. Expires ven 22, 2010	Signature of Notary Public	
Place Notary Seal Above	TIONAL	
Though this section is optional, completing this information can deter alteration of the document or fraudulent reattachment of this form to an unintended document.		
Description of Attached Document Title or Type of Document: Substitution of Number of Pages: Signer(s) Other Tha		
Capacity(ies) Claimed by Signer(s)		
Signer's Name: Corporate Officer — Title(s):	Signer's Name: ☐ Corporate Officer — Title(s):	
□ Partner — □ Limited □ General□ Individual □ Attorney in Fact	☐ Partner — ☐ Limited ☐ General☐ Individual ☐ Attorney in Fact	
☐ Trustee ☐ Guardian or Conservator	☐ Trustee ☐ Guardian or Conservator	
☐ Other:	☐ Other: Signer Is Representing:	