

APN: 1220-21-610-071

RECORDING REQUESTED BY:  
Sables, LLC

AND WHEN RECORDED MAIL TO:  
Sables, LLC  
c/o Law Office of Les Zieve  
3753 Howard Hughes Parkway, Suite 200  
Las Vegas, Nevada 89169

SPACE ABOVE THIS LINE FOR RECORDER'S USE

TS No.: 15-40219

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

**SUBSTITUTION OF TRUSTEE**

WHEREAS, GEORGE M. HARTSHORN JR, SINGLE MAN was the original Trustor, FIRST SOURCE TITLE was the original Trustee, and Mortgage Electronic Registration Systems, Inc. as nominee for CROSSCOUNTRY MORTGAGE, INC., its successors and assigns was the original Beneficiary under that certain Deed of Trust dated 1/25/2013 and recorded on 1/30/2013 as Instrument No. 817291, in book 113, page 8947 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 Sables, LLC, a Nevada limited liability company, 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: 12-17-2015

Crosscountry Mortgage, Inc.

By:  Tricia Ho Vice President

A notary public or other officer completing this certificate verifies only the identity of the individual who signed the document to which this certificate is attached, and not the truthfulness, accuracy, or validity of that document.

State of ILLINOIS  
County of LAKE

On 12-17-15 before me  Tracy A. Duck Notary Public, personally appeared  who proved to me on the basis of satisfactory evidence to be the person(s) whose name(s) 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 ILLINOIS that the foregoing paragraph is true and correct.

WITNESS my hand and official seal.

Signature  (Seal)

