

APN: 122009416005
State of Nevada
County of Douglas
Loan Number:
0217352632
MIN:
100017937190800955
MERS Phone #: 1-
888-679-6377

Mail Tax Statements and When Recorded
ReturnTo:
WELLS FARGO HOME MORTGAGE
LIEN RELEASE DEPT
MAC X9901-L1R
P.O. BOX 1629
MINNEAPOLIS, MN 55440-9790
Requested By:
WELLS FARGO HOME MORTGAGE
DARLA LAVIGNE PHILIPCZYK
2701 WELLS FARGO WAY
MINNEAPOLIS, MN 55467

DOUGLAS COUNTY, NV
Rec:\$17.00
\$17.00 Pgs=1
WELLS FARGO HOME MORTGAGE
KAREN ELLISON, RECORDER

2016-882077
06/09/2016 12:24 PM

Substitution of Trustee and Full Reconveyance

WHEREAS, the undersigned, MORTGAGE ELECTRONIC REGISTRATION SYSTEMS, INC. ,as the present Beneficiary(ies) under said Deed of Trust hereby substitutes a new Trustee, WELLS FARGO FINANCIAL NATIONAL BANK, A NATIONAL BANKING ASSOCIATION under said Deed of Trust, and WELLS FARGO FINANCIAL NATIONAL BANK, A NATIONAL BANKING ASSOCIATION as Trustee under said Deed of Trust does hereby reconvey, without warranty, to the person or persons legally entitled thereto, the estate now held by Trustee under said Deed of Trust.

WHEREAS, the date of said Deed of Trust, the name of the Trustor who executed the same in the County of Douglas, State of NV, the date of recordation and document number of Official Records of said County where said Deed of Trust is recorded as follows:

Trustor: STEPHEN J O'BRIEN AND JANET A O'BRIEN

Date Recorded: 10/27/2009 Document Number: 752898 Book: 1009 Page: 5665

Dated: **06/09/2016**

MORTGAGE ELECTRONIC REGISTRATION
SYSTEMS, INC.

By:



DARLA LAVIGNE PHILIPCZYK
Assistant Secretary

WELLS FARGO FINANCIAL NATIONAL BANK, A
NATIONAL BANKING ASSOCIATION

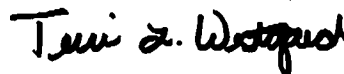
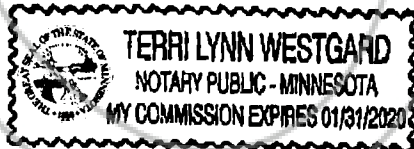
By:



DARLA LAVIGNE PHILIPCZYK
TITLE OFFICER

STATE OF MN } s.s.
COUNTY OF Hennepin

On **06/09/2016** before me, **TERRI LYNN WESTGARD** , a Notary Public, personally appeared **DARLA LAVIGNE PHILIPCZYK** , Assistant Secretary and **DARLA LAVIGNE PHILIPCZYK** , TITLE OFFICER 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, and that by his/her/their signature on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument.



TERRI LYNN WESTGARD , Notary Public
My Commission Expires: **01/31/2020**