DOUGLAS COUNTY, NV

2017-906693

Rec:\$35.00

\$35.00 Pgs=1 11/08/2017 01:34 PM

PREMIER AMERICAN TITLE

KAREN ELLISON, RECORDER

## RECORDING REQUESTED BY:

National Default Servicing Corporation

## WHEN RECORDED MAIL TO:

National Default Servicing Corporation 7720 N. 16th Street, Suite 300 Phoenix, AZ 85020

61701240

NDSC File No. : 17-01123-CE-NV APN No.

: 1420-08-314-033

Property Address: 3491 LONG DR Minden NV 89423-7711

SPACE ABOVE THIS LINE FOR RECORDER'S USE

## SUBSTITUTION OF TRUSTEE

WHEREAS, James W. O'Connor and Eleanor R. O'Connor, husband and wife as joint tenants with right of survivorship was the original Trustor(s), Commonwealth Land Title Company was the original Trustee and Mortgage Electronic Registration Systems, Inc. as nominee for Acceptance Capital Mortgage Corporation, its successors and assigns was the original Beneficiary under that certain Deed of Trust dated 11/05/2014 and recorded on 11/10/2014 as Instrument No. 2014-852534 of the Official Records of Douglas County, State of NV and

WHEREAS, the undersigned is the present beneficiary under the said Deed of Trust, and

WHEREAS, the undersigned desires to substitute a new Trustee under said Deed of Trust in place of said original Trustee, or Successor Trustee, thereunder, in the manner in said Deed of Trust provided,

NOW, THEREFORE, the undersigned hereby substitutes NATIONAL DEFAULT SERVICING CORPORATION, An Arizona Corporation, whose address is 7720 N. 16th Street, Suite 300, Phoenix, Arizona 85020, as Trustee under said Deed of Trust. Said Substitute Trustee is qualified to serve as Trustee under the laws of this state.

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

Reverse Mortgage Funding LLC by Celink Attorney in Fact

, e	Dated: November 1, 2017 my McCain  By: Amy McCain  Its: Assistant Vice President of Celink
	STATE OF Michigan) COUNTY OF Clinton)
	On Noul, appeared Army Coair who personally known to me (or who 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 hand worman  Signature hand worman  My Commission Expires June 25, 2022  Acting in the County of