

APN: 0000-11-330-020  
State of Nevada  
County of Douglas  
Loan Number:  
82508560100001R

Mail Tax Statements and When Recorded  
ReturnTo:  
WELLS FARGO BANK, N.A.  
LIEN RELEASE DEPT  
MAC E0501-022  
P.O. BOX 1992  
SAN BERNARDINO, CA 92402  
  
Requested By:  
WELLS FARGO BANK, N.A.  
CHRISTINE CARDENAS  
E0501-022  
SAN BERNARDINO, CA 92408

DOUGLAS COUNTY, NV      **2018-911541**  
Rec:\$35.00  
\$35.00      Pgs=1      **03/14/2018 01:52 PM**  
WELLS FARGO BANK, N.A.  
KAREN ELLISON, RECORDER

**Substitution of Trustee and Full Reconveyance**

WHEREAS, the undersigned, WELLS FARGO BANK, N.A., successor by merger to WELLS FARGO BANK WEST, N.A. ,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: ROBIN DESOTA

Date Recorded: 03/20/2002    Document Number: 0537479    Book: 0302    Page: 07351

Dated: **03/14/2018**

WELLS FARGO BANK, N.A., successor by merger to WELLS FARGO BANK WEST, N.A.  
By:

*Christine Cardenas*

CHRISTINE CARDENAS  
Vice President Loan Documentation

WELLS FARGO FINANCIAL NATIONAL BANK, A NATIONAL BANKING ASSOCIATION  
By:

*Christine Cardenas*

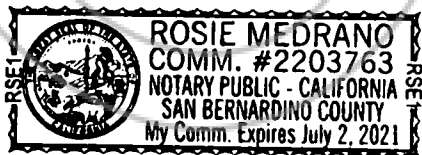
CHRISTINE CARDENAS  
TITLE OFFICER

STATE OF CA  
COUNTY OF **San Bernardino** } s.s.

On this date of **03/14/2018** , before me, ROSIE MEDRANO , a Notary Public, personally appeared **CHRISTINE CARDENAS** and **CHRISTINE CARDENAS** 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.

I certify under PENALTY OF PERJURY under the laws of the State of California that the foregoing is true and correct.

Witness my hand and official seal.



*Rosie Medrano*

ROSIE MEDRANO , Notary Public  
My Commission Expires: **07/02/2021**  
Commission #: **2203763**