

DOUGLAS COUNTY, NV

2019-924643

Rec:\$35.00

\$35.00

Pgs=2

01/16/2019 08:28 AM

WELLS FARGO BANK, N.A.

KAREN ELLISON, RECORDER

APN: **1318-23-310-041**
RECORDING REQUESTED BY:
WELLS FARGO BANK, N.A.
1000 BLUE GENTIAN RD
SUITE 200
EAGAN MN 55121

WHEN RECORDED MAIL TO:
WELLS FARGO BANK, N.A.
1000 BLUE GENTIAN RD #200
MAC: N9289-018
EAGAN, MN 55121-4400
ATTN: ASSIGNMENT TEAM

The undersigned does hereby affirm that this document submitted for recording does not contain personal information about any person.

ASSIGNMENT OF DEED OF TRUST

For good and valuable consideration, the sufficiency of which is hereby acknowledged, **WELLS FARGO BANK, N.A. S/B/M WELLS FARGO HOME MORTGAGE, INC. , 1 HOME CAMPUS , DES MOINES, IA 50328** , by these presents does convey, assign, transfer and set over to: **U.S. BANK NATIONAL ASSOCIATION, AS TRUSTEE, SUCCESSOR IN INTEREST TO WACHOVIA BANK, NATIONAL ASSOCIATION, AS TRUSTEE FOR MASTR ADJUSTABLE RATE MORTGAGES TRUST 2004-13, MORTGAGE PASS-THROUGH CERTIFICATES, SERIES 2004-13 , 60 Livingston Avenue Mail Code: EP-MN-WS3D, St. Paul, MN 55107-2292** , the following described Deed of Trust, with all interest, all liens, and any rights due or to become due thereon. Said Deed of Trust for **\$230000.00** is recorded in the State of **NEVADA** , County of **Douglas** Official Records, dated **04/20/2004** and recorded on **05/03/2004** , as Instrument No. **0612136** in Book No. **0504** , at Page No. **00604**

Original Trustor/Grantor: **RANDALL R REED AND LAUREL WILLIAMS, HUSBAND AND WIFE**

Original Beneficiary: **VISTA MORTGAGE, LLC**

Property Address: **6 CASCADE COURT, ZEPHYR COVE, NV 89448**

Date: **01/16/2019**

WELLS FARGO BANK, N.A. S/B/M WELLS FARGO HOME MORTGAGE, INC.

By:



DAWN D. CERICOLA, Vice President Loan Documentation

STATE OF MD
COUNTY OF Frederick } s.s.

On **01/16/2019**, before me **LINDA S. OTT**, Notary Public, personally appeared **DAWN D. CERICOLA**, Vice President Loan Documentation of **WELLS FARGO BANK, N.A. S/B/M WELLS FARGO HOME MORTGAGE, INC.** personally known to me to be the person whose name is subscribed to the within instrument and acknowledged to me that he/she executed the same in his/her authorized capacity, and that by his/her signature on the instrument, the person or the entity upon behalf of which the person acted, executed the instrument.



LINDA S. OTT, Notary Public
My Commission Expires: **10/11/2021**



acfb81a0

