

NEVADA  
COUNTY OF DOUGLAS

RECORD 2ND

DOUGLAS COUNTY, NV      **2019-929084**  
Rec:\$35.00  
\$35.00      Pgs=1      05/15/2019 03:16 PM  
SECURITY CONNECTIONS INC  
KAREN ELLISON, RECORDER

PARCEL NO. 1320-32-715-014



WHEN RECORDED MAIL TO: FIRST AMERICAN MORTGAGE  
SOLUTIONS  
1795 INTERNATIONAL WAY  
IDAHO FALLS, ID 83402  
PH. 208-528-9895  
MAIL TAX STATEMENTS TO: JOSETTE CARIA  
1461 KENTFIELD AVENUE REDWOOD CITY CA 94061

**FULL RECONVEYANCE**

The Undersigned does hereby affirm that this document submitted for recording does not contain the social security number of any person or persons. (per NRS 239B.030)

WHEREAS, **FIRST AMERICAN TITLE INSURANCE COMPANY**, is the Trustee, Successor Trustee, or Substitute Trustee, under that certain Deed of Trust dated **JULY 03, 2004**, executed by **JOSETTE CARIA, JEFF CARIA WIFE AND HUSBAND**, Trustor, to **REBECCA W. SHALA**, Original Trustee, for the benefit of **MORTGAGE ELECTRONIC REGISTRATION SYSTEMS, INC., AS NOMINEE FOR SUNTRUST MORTGAGE, INC., ITS SUCCESSORS AND ASSIGNS**, Original Beneficiary, and recorded on **JULY 13, 2004** in Book **0704** at Page **04629** as Instrument No. **0618589** of the Official Records in the County Recorder's office of **DOUGLAS** County, State of **NEVADA** and more particularly described on said Deed of Trust referred to herein.

And having received from **MORTGAGE ELECTRONIC REGISTRATION SYSTEMS, INC., AS NOMINEE FOR SUNTRUST MORTGAGE, INC., ITS SUCCESSORS AND ASSIGNS**, located at **P.O. BOX 2026, FLINT, MICHIGAN 48501-2026**, the Current Beneficiary, a written request to reconvey, reciting that all sums secured by said Deed of Trust have been fully paid, and said Deed of Trust has been surrendered to said Trustee for cancellation, and the Undersigned does hereby **RECONVEY**, without warranty, to the person or persons legally entitled thereto, the estate now held by it thereunder.

IN WITNESS WHEREOF, the Undersigned has caused this Instrument to be executed on this **MAY 14, 2019**.

**FIRST AMERICAN TITLE INSURANCE COMPANY**

  
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**LISA M. CARTER, ASSISTANT SECRETARY**

STATE OF IDAHO      COUNTY OF BONNEVILLE      ) ss.

On **MAY 14, 2019**, before me, **NATALIE FELT**, personally appeared **LISA M. CARTER** known to me to be the **ASSISTANT SECRETARY** of **FIRST AMERICAN TITLE INSURANCE COMPANY** the corporation that executed the instrument or the person who executed the instrument on behalf of said corporation, and acknowledged to me that such corporation executed the same.

  
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**NATALIE FELT (COMMISSION EXP. 09/28/2024)**  
**NOTARY PUBLIC**

**NATALIE FELT**  
Notary Public - State of Idaho  
Commission Number 20181903  
My Commission Expires Sep 28, 2024

POD: 20190501  
SL8120112IM - LR - NV  
