DOUGLAS COUNTY, NV

Rec:\$35.00 Total:\$35.00 US BANK 2019-935952 09/30/2019 02:39 PM

Pas=2

APN # 1320-32-115-008

Recording Requested By: U.S. BANK HOME MORTGAGE And When Recorded Mail To: U.S. BANK MORTGAGE

SERVICING P.O. BOX 6060 NEWPORT BEACH, CA 92658-9880

MERS MIN#: 100019977910021837

PHONE#: (888) 679-6377



KAREN ELLISON, RECORDER

Investor #: 116

SUBSTITUTION OF TRUSTEE

Service#: 2032497RL1



Loan#: 6850619131

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

WHEREAS, JAMES W SEYFRIED, AN UNMARRIED MAN as Trustor, and MORTGAGE ELECTRONIC REGISTRATION SYSTEMS, INC. AS NOMINEE FOR GUILD MORTGAGE COMPANY, A CALIFORNIA CORPORATION, ITS SUCCESSORS AND ASSIGNS, as the Original Beneficiary under that certain Deed of Trust, dated FEBRUARY 04, 2016 and recorded FEBRUARY 05, 2016 as Instrument No. 2016-876340, in Book No. ---, at Page No. --- of official records of DOUGLAS County. State of NEVADA.

WHEREAS, the undersigned desires to substitute a Trustee under said Deed of Trust in the place and stead of GUILD ADMINISTRATION CORP., A CALIFORNIA CORPORATION.

NOW THEREFORE, the undersigned hereby substitutes U.S. BANK NATIONAL ASSOCIATION, 4801 FREDERICA STREET, OWENSBORO, KY 42301 0000 as Trustee under said Deed of Trust.

Dated: SEPTEMBER 23, 2019

Beneficiary:

MORTGAGE ELECTRONIC REGISTRATION SYSTEMS, INC AS NOMINEE FOR GUILD MORTGAGE COMPANY, A CALIFORNIA CORPORATION, ITS SUCCESSORS AND ASSIGNS

Вул

Sara Camp, Assistant Secretary

Loan#: 6850619131 Srv#: 2032497RL1

Page 2

 $\begin{array}{ccc} \text{State of} & \underline{\text{KENTUCKY}} \\ \text{County of} & \underline{\text{DAVIESS}} & \\ \end{array} \} \text{ ss.}$

On SEPTEMBER 23, 2019, before me, Billie Pritchett, a Notary Public, personally appeared Sara Camp, 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 KENTUCKY that the foregoing paragraph is true and correct. Witness my hand and official seal.

(Notary Name): Billie Pritchett Commission Expires: 04/29/2023

Commission No: 622348

