

RECORDING REQUESTED BY
First American Title Insurance Company

AND WHEN RECORDED MAIL TO:
Dustin & Tiffany Kirchner
1454 Douglas Ave
Gardnerville NV 89410

DOUGLAS COUNTY, NV **2021-970079**
Rec:\$40.00
\$40.00 Pgs=1 **06/30/2021 09:31 AM**
FIRST AMERICAN TITLE MINDEN
KAREN ELLISON, RECORDER

Space Above This Line for Recorder's Use Only

A.P.N.: **1320-32-813-008**

File No.: **143-2627028 (et)**

SUBSTITUTION OF TRUSTEE AND FULL RECONVEYANCE

WHEREAS, **Dustin M. Kirchner and Tiffany L. Kirchner, husband and wife** was the original Trustor, and **First American Tile Insurance Corporation, A Nebraska Corporation** the original Trustee, and **Warren A. Hagstrom, Trustee of The W&P Family Trust A, Dated October 12, 1989** the Beneficiary, under that certain Deed of Trust dated **October 12, 2018** and recorded **October 12, 2018** as Instrument No. **2018-920955**, in Book **N/A**, Page(s) **N/A**, Official Records of the County of **Douglas**, State of **Nevada**, and

LOT 3, BLOCK B, IN THE HAWKINS ADDITION TO THE TOWN OF GARDNERVILLE, AS PER THE OFFICIAL MAP OR PLAT THEREOF, FILED IN THE OFFICE OF THE COUNTY RECORDER OF DOUGLAS COUNTY, STATE OF NEVADA, ON MAY 16, 1915, AS DOCUMENT NO. 3000.

WHEREAS, the undersigned Beneficiary desires to substitute a new Trustee under said Deed of Trust, now therefore, the undersigned hereby substitutes (themselves, himself, herself) as Trustee under said Deed of Trust and does hereby reconvey, without warranty, to the person or persons legally entitled thereto, the Estate now held by him thereunder.


Karen Hagstrom Kirchner, Successor Trustee


Michael Kirchner, Successor Trustee


Document Date: June 14, 2021

STATE OF NV)
COUNTY OF Douglas)

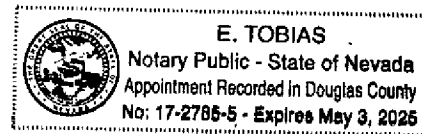
On 6-16-2021, before me, Emily Tobias personally appeared

Karen Hagstrom + Michael Kirchner, personally known to me (or proved to me on the basis of satisfactory evidence) to 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 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 

My Commission Expires: 5/3/25



This area for official notarial seal.