

**RECORDING REQUESTED BY**  
First American Title Insurance Company

**AND WHEN RECORDED MAIL TO:**  
John-Douglas J. Miller and Cara Tibaduiza  
990 Hilltop Dr.  
Carson City, NV 89705

DOUGLAS COUNTY, NV **2021-970519**  
Rec:\$40.00  
\$40.00 Pgs=1 **07/08/2021 11:03 AM**  
FIRST AMERICAN TITLE MINDEN  
KAREN ELLISON, RECORDER

Space Above This Line for Recorder's Use Only

A.P.N.: **1420-08-411-010**

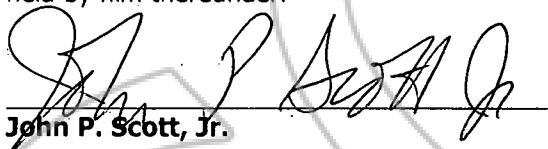
File No.: **143-2627939 (mk)**

### SUBSTITUTION OF TRUSTEE AND FULL RECONVEYANCE

WHEREAS, **John Miller and Cara Tibaduiza** was the original Trustor, and **Not set out** the original Trustee, and **John P. Scott, Jr.** the Beneficiary, under that certain Deed of Trust dated **November 10, 2020** and recorded **November 13, 2020** as Instrument No. **2020-956406**, in Book **n/a**, Page(s) **n/a**, Official Records of the County of **Douglas**, State of **Nevada**, and

**LOT 11, IN BLOCK Q, OF THE FINAL MAP NO. 1001-9 SUNRIDGE HEIGHTS PHASES 6B, 7A, & 8B, A PLANNED UNIT DEVELOPMENT, FILED FOR RECORD IN THE OFFICE OF THE COUNTY RECORDER OF DOUGLAS COUNTY, STATE OF NEVADA, ON JANUARY 30, 1996, AS DOCUMENT NO. 380052 AND BY CERTIFICATE OF AMENDMENT RECORDED FEBRUARY 2, 1996, IN BOOK 296, PAGE 251 AS DOCUMENT NO. 380351 AND RECORDED AUGUST 14, 1996, IN BOOK 896, PAGE 2586, AS DOCUMENT NO. 394288 OF OFFICIAL RECORDS.**

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.

  
\_\_\_\_\_  
**John P. Scott, Jr.**

Document Date: July 08, 2021

STATE OF Nevada )  
COUNTY OF Douglas ) SS

On July 8, 2021 before me, Kim E Figueroa personally appeared

John P. Scott, Jr., 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: 10/01/2024



This area for official notarial seal.