

DOUGLAS COUNTY, NV

2024-1011872

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WFG NATIONAL TITLE INSURANCE CO

SHAWNYNE GARREN, RECORDER

APN: 1220-21-810-183

RECORDING REQUESTED BY:

Sables, LLC

AND WHEN RECORDED MAIL TO:

SABLES, LLC, a Nevada limited liability company

c/o ZBS Law, LLP

30 Corporate Park Drive, Suite 450

Irvine, CA 92606

TS No.: 24-70061

SPACE ABOVE THIS LINE FOR RECORDER'S USE

The undersigned hereby affirms that there is no Social Security number contained in this document.

### SUBSTITUTION OF TRUSTEE

WHEREAS, RICHARD L. BURTON, A SINGLE MAN was the original Trustor, UNITED TITLE OF NEVADA was the original Trustee, and WELLS FARGO BANK, N.A. was the original Beneficiary under that certain Deed of Trust dated 8/26/2005 and recorded on 9/16/2005 as Instrument No. 0655235, in book 0905, page 5792 of Official Records of Douglas County, Nevada; and

WHEREAS, the undersigned is the present Beneficiary under said Deed of Trust, and

WHEREAS, the undersigned desires to substitute a new Trustee under said Deed of Trust in place and instead of said original Trustee, or Successor Trustee, thereunder, in the manner in said Deed of Trust provided,

NOW, THEREFORE, the undersigned hereby substitutes Sables, LLC, a Nevada limited liability company, as Trustee under said Deed of Trust.

Whenever the context hereof so requires, the masculine gender includes the feminine and/or neuter, and the singular number includes the plural.

Dated: 8/24/24

LLACG COMMUNITY INVESTMENT FUND

Wade Carroll, Manager

A notary public or other officer completing this certificate verifies only the identity of the individual who signed the document to which this certificate is attached, and not the truthfulness, accuracy, or validity of that document.

State of Colorado

County of Montrose

On August 29, 2024 before me, Kimberli Holcomb Notary Public, personally appeared Wade Carroll 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 Colorado that the foregoing paragraph is true and correct.

WITNESS my hand and official seal.

Signature (Seal)

KIMBERLI HOLCOMB  
NOTARY PUBLIC - STATE OF COLORADO  
NOTARY ID 20134026559  
MY COMMISSION EXPIRES APR 26, 2025