

RECORDING REQUESTED BY

AND WHEN RECORDED MAIL TO

NAME

ADDRESS

CITY
STATE & ZIP

SUBSTITUTION OF TRUSTEE AND FULL RECONVEYANCE

WHEREAS _____
was the original Trustor, _____
the original Trustee, and _____
the Beneficiary, under that certain Deed of Trust dated _____ and recorded
on _____ as Instrument No. _____ or in book _____,
page _____, Official Records of the County of _____, State of California, and affecting
the land described in said Deed of Trust, and

WHEREAS the undersigned Beneficiary desires to substitute a new Trustee under said Deed of Trust in place and
stead of _____, 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.

APN NO.:

DATE: _____

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 California

County of _____

On _____ before me, _____
(here insert name and title of the officer), personally appeared _____, 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 California that the foregoing paragraph is
true and correct.**

WITNESS my hand and official seal.

Signature _____ (Seal)