AFN #2011178520 Recorded 06/27/2011 at 03:44 PM DocType: ASGN Filed by: REGIONAL TRUSTEE SERVICES CORP Page: 1 of 1 Auditor Timothy 0. Todd Skamania County, WA

When Recorded Return To:

When recorded return to: vvnen recorded return to:
Regional Trustee Services Corporation
616 1st Avenue Suite 500
Seattle, WA 98104 2258
Attention: Lien Release Department

617602

APPOINTMENT OF SUCCESSOR TRUSTEE
HSBC MORTGAGE SERVICES #:0014447122 "SACON" Skamania, Washington
MERS #: 100308000020887359 SIS #: 1-888-679-6377

WHEREAS, the undersigned is the present Beneficiary under the Deed of Trust Described as follows:

Original Trustor: MAUREEN SACON AND NEAL SACON, WIFE AND HUSBAND AS JOINT TENANTS WITH RIGHT OF SURVIVORSHIP AND NOT AS TENANTS-IN-COMMON Original Beneficiary: MORTGAGE ELECTRONIC REGISTRATION SYSTEMS INC AS NOMINEE FOR 123LOAN,

LLC

Dated: 05/22/2006 Recorded: 06/30/2006 in Book/Reel/Liber: N/A Page/Folio: N/A as Instrument No : 2006162156 In the County of Skamania State of Washington

Property Address: 4051 COOK UNDERWOOD ROAD, MILL A, WA 98605

AND WHEREAS, the undersigned, who is the present Beneficiary under said Deed of Trust, desires to appoint a successor Trustee under said Deed of Trust in the place and stead of present Trustee thereunder;

Now therefore, the undersigned hereby appoints REGIONAL TRUSTEE SERVICES whose address is 616 FIRST AVENUE, SUITE 500, SEATTLE, WA 98104 as Successor Trustee under said Deed of Trust, to have all the powers of said original Trustee, effective immediately.

MORTGAGE ELECTRONIC REGISTRATION SYSTEMS, INC. On June 13th, 2011

Ву: Jana C. Hunt, Assistant Secretary

STATE OF New York **COUNTY OF Erie**

On June 13th, 2011, before me, GAIL FERRARI, a Notary Public in and for Erie in the State of New York, personally appeared Jana C. Hunt, Assistant Secretary, personally known to me (or 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, and that by his/her/their signature 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,

GAIL FERRARI

Notary Expires: 05/17/2015 #01FE6024735

Qualified in Erie County

(This area for notarial seal)