

APN # 002-073-12

[RECORDING REQUESTED BY  
First American Title Insurance Company  
On behalf of Trustee Corps

AND WHEN RECORDED MAIL TO:]

Trustee Corps  
2112 Business Center Drive,  
2<sup>nd</sup> floor  
Irvine, CA 92612The undersigned hereby affirms that there is no  
Social Security number contained in this document.

[SPACE ABOVE THIS LINE FOR RECORDER'S USE ONLY]

Trustee Sale# NV0950076-3 Loan# 0036484699 Title Order# 4196472-*MJ*

## SUBSTITUTION OF TRUSTEE

WHEREAS, UNITED TITLE OF NEVADA was the original Trustee, and WELLS FARGO HOME MORTGAGE, INC. was the original Beneficiary, and JOHN SETTLES, A SINGLE PERSON was the original Trustor(s) under that certain Deed of trust dated 11/30/2003, Recorded on 01/23/2004 as Document No. 121665 BOOK 182 PAGE 251 of Official Records in the office of the Recorder of Lincoln County, NEVADA, and

WHEREAS, WELLS FARGO BANK, N.A. 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 the place of and instead of said original Trustee or Successor Trustee, thereunder, in the manner in said Deed of Trust provided,

NOW, THEREFORE, the undersigned Beneficiary hereby substitutes MTC FINANCIAL INC. dba TRUSTEE CORPS, whose address is: 2112 BUSINESS CENTER DRIVE, 2<sup>ND</sup> FLOOR, IRVINE, CA 92612, 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: 07/17/09BENEFICIARY:  
**WELLS FARGO BANK, N.A.**  
\_\_\_\_\_  
Xee Moua, VP of Loan Doc



Trustee Sale# NV0950076-3 Loan# 0036484699  
Title Order# 4196472

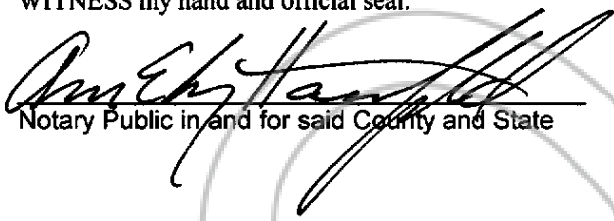
State of South Carolina

County of York

On Xee Moua before me, <sup>Elizabeth</sup>Amanda Hosenfeld, a notary public, personally appeared Xee Moua 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 South Carolina that the foregoing paragraph is true and correct.

WITNESS my hand and official seal.

  
Notary Public in and for said County and State

AMANDA ELIZABETH HOSENFELD  
Notary Public, South Carolina  
My Commission Expires  
April 27, 2017