

LINCOLN COUNTY, NV **2021-159689**  
\$37.00  
Rec:\$37.00 **03/05/2021 09:21 AM**  
COVIUS MORTGAGE SOLUTIONS DBA UPF Pgs=1 AE  
OFFICIAL RECORD  
AMY ELMER, RECORDER

**001-087-09**  
**RECORDING REQUESTED BY AND**  
**AFTER RECORDING MAIL TO:**  
UPF WASHINGTON INCORPORATED  
12410 E MIRABEAU PKWY #100  
SPOKANE VALLEY, WA 99216  
Ref. No. 1816645-S(P)(E)

**SUBSTITUTION OF TRUSTEE**

**MIN: 100070202002184229**

**MERS Phone: 1-888-679-6377**

WHEREAS, FIRST AMERICAN TITLE INSURANCE COMPANY is the original Trustee; and the undersigned MORTGAGE ELECTRONIC REGISTRATION SYSTEMS INC. (MERS), nominee for FINANCE OF AMERICA MORTGAGE LLC, its successors and assigns, is the present Beneficiary under that certain Deed of Trust executed by LAURIE DIANE COLE, TRUSTEE OF THE LAURIE DIANE COLE REVOCABLE LIVING TRUST DATED JULY 20, 2015, as Trustor(s) on 5/9/2020 and was recorded in the office of the Lincoln County Recorder, State of Nevada on 5/21/2020 in Book N/A at Page N/A under Recording no. 2020-158370, and covers the real property situate in Lincoln County, Nevada, as described therein.

WHEREAS, the undersigned nominee for the Beneficiary now desires to substitute a new Trustee under said Deed of Trust in the place and stead of said original Trustee:

NOW THEREFORE, the undersigned nominee for the Beneficiary hereby substitutes and appoints UPF WASHINGTON, INCORPORATED, whose address is 12410 E. Mirabeau Parkway Suite 100, Spokane Valley, WA 99216, as Successor Trustee under said Deed of Trust.

Loan #: 0051233047

**MORTGAGE ELECTRONIC REGISTRATION  
SYSTEMS INC. (MERS), AS DESIGNATED NOMINEE  
FOR FINANCE OF AMERICA MORTGAGE LLC, ITS  
SUCCESSORS AND ASSIGNS**

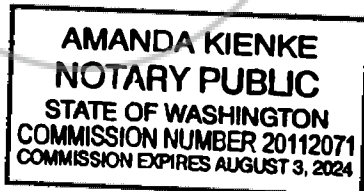
DATED 10/29/2020

BY: *C*  
Cara Kuch, Assistant Vice President

STATE OF WASHINGTON, COUNTY OF SPOKANE

On 10/29/2020, before me, the undersigned Notary Public, personally appeared MORTGAGE ELECTRONIC REGISTRATION SYSTEMS INC., by and through Cara Kuch, Assistant Vice President, 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(ies), and that by his/her/their signature(s) on the instrument the person(s) or entity upon behalf of which the person(s) acted, executed the instrument.

WITNESS my hand and official seal.



*AK*  
NOTARY PUBLIC in and for the State of WASHINGTON

Printed Name: Amanda Kienke

My commission expires: 8/3/2024