RECORDING REQUEST	ED BY:		
AND WHEN RECORDED	MAIL TO:		
Order No.: Escrow No.:			
APN: SUBSTITU	TION OF TRUSTE	SPACE ABOVE THIS LINE FOR E AND FULL RECON	
WHEREAS,			_ was the original Trustor,
			was the original Trustee,
and		w	as the original beneficiary
under that certain Deed	of Trust dated		and recorded on
	, as Instrum	ent No	of Official Records
place of	ndersigned hereby sub and does hereby REC estate now held by it the	ostitute(s) itself/himself/hers ONVEY, without warranty,	self/themselves as Trustee
A notary public or other officer document to which this certi		e verifies only the identity of t the truthfulness, accuracy, or	
STATE OF CALIFORNIA)		
STATE OF CALIFORNIA COUNTY OF) SS.)		
011	belote ine,		, Notary Public, personally
appeared			,
who proved to me on the basis within instrument and acknowle and that by his/her/their signatu acted, executed the instrument.	dged to me that he/she/the	ey executed the same in his/her	r/their authorized capacity(ies),
I certify under PENALTY OF PE correct. WITNESS my hand and official s		he State of California that the f	oregoing paragraph is true and
WITHEOUTHY HAIR AND OHICIALS	cai.		
Signature		_	