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04/22/2021 08:34 AM Pages: 1 of 1 Fees: $103.50
Skagit County Auditor, WA

UNOFFICIAL DOCUMENT

When Recorded Mail To:
First American Mortgage Solutions
1795 International Way
Idaho Falls, ID 83402
Ph. **208-528-9895**

DEED OF RECONVEYANCE

WASHINGTON
COUNTY OF **SKAGIT**

Record 2nd

Parcel No. **P109294 / 4680-000-020-0000**

Legal Description: **Lot 20 Biglake Heights**

THE UNDERSIGNED, **FIRST AMERICAN TITLE INSURANCE COMPANY**, located at **1 FIRST AMERICAN WAY, SANTA ANA, CA 92707**, as Trustee, Successor Trustee, or Substitute Trustee, under that certain Deed of Trust dated **APRIL 26, 2018**, executed by **RHONDA F WAHLGREN, A MARRIED WOMAN, AS HER SEPARATE ESTATE**, Trustor, to **RECONTRUST COMPANY, N.A.**, Original Trustee, for the benefit of **BANK OF AMERICA, N.A.**, Original Beneficiary, and recorded on **MAY 01, 2018** as Auditor's File No. **201805010037**, in the Records of the County Auditor's Office for **SKAGIT** County, State of **WASHINGTON**.

Property Address: **17141 ZOYA DR, MOUNT VERNON, WA 98274**

WHEREAS, the Undersigned received from **BANK OF AMERICA, N.A.**, the Beneficiary of said Deed of Trust, a written request to reconvey, reciting that the obligation secured by said Deed of Trust has been fully paid and performed, does hereby grant, bargain, and convey, without any covenant or warranty, express or implied, to the person or persons legally entitled thereto, all of the estate held by the Undersigned in and to said described premises by virtue of said Deed of Trust.

IN WITNESS WHEREOF, the undersigned has caused this Instrument to be executed on **APRIL 19, 2021**.
FIRST AMERICAN TITLE INSURANCE COMPANY

ARIEL GERARDO MORAN, VICE PRESIDENT

STATE OF **ARIZONA** COUNTY OF **MARICOPA**) ss.

On **APRIL 19, 2021**, before me, **ANGELINA MILLIGAN**, Notary Public, personally appeared **ARIEL GERARDO MORAN**, **VICE PRESIDENT** of **FIRST AMERICAN TITLE INSURANCE COMPANY**, whose identity was proven to me on the basis of satisfactory evidence to be the person who he or she claims to be and whose name is subscribed to the within instrument and acknowledged to me that they executed the same in their authorized capacity, and that by their signature on the instrument the person, or entity, who they acted on the behalf of, executed the instrument.

ANGELINA MILLIGAN (COMMISSION EXP. 11/15/2024)
NOTARY PUBLIC

ANGELINA MILLIGAN
Notary Public, State of Arizona
Maricopa County
Commission # 593965
My Commission Expires
November 15, 2024

POD: 20210413
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