

**2014 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M00000001157

**Entity Name:** HOMESERVICES LENDING, LLC

**Current Principal Place of Business:**

1 HOME CAMPUS  
MAC X2401-05W  
DES MOINES, IA 50328

**Current Mailing Address:**

1 HOME CAMPUS, MAC X2401-05W  
DES MOINES, IA 50328-0001

**FEI Number:** 41-1914032

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 32301-2525 US

*The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.*

**SIGNATURE:** \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Authorized Person(s) Detail :**

Title MGRM  
Name WELLS FARGO VENTURES, LLC  
Address 1 HOME CAMPUS, MAC X2401-05W  
City-State-Zip: DES MOINES IA 50328-0001

*I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** KAROLYN BAKER

**VICE PRESIDENT**

**03/20/2014**

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date