

2014 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M04000004184

Entity Name: NATIONAL LINK, L.L.C.

Current Principal Place of Business:

300 CORPORATE CENTER DRIVE
SUITE 300
MOON TOWNSHIP, PA 15108

Current Mailing Address:

C/O MADELINE G. M. LOVEJOY
2510 N REDHILL AVE
SANTA ANA, CA 92705

FEI Number: 33-1098667

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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 NATIONAL CITY PARTNERSHIP SOLUTIONS, INC.
Address 1900 EAST NINTH STREET
City-State-Zip: CLEVELAND OH 44114

Title MGRM
Name SERVICELINK NLS, LLC
Address 601 RIVERSIDE AVE
City-State-Zip: JACKSONVILLE FL 32204

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: SERVICELINK NLS, LLC

MGRM

02/21/2014

_____ Electronic Signature of Signing Authorized Person(s) Detail

_____ Date