

1.) CORPORATION NAME: <b>InterLink Computers, Inc.</b>	DUE DATE: <b>3/31/2016</b>				
2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: <b>JASON O ELLIS 11860 FISHING POINT DR NEWPORT NEWS, VA</b>	SCC ID NO: <b>04620233</b>				
3.) CITY OR COUNTY OF VA REGISTERED OFFICE: <b>NEWPORT NEWS CITY</b>	5.) STOCK INFORMATION <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="width: 50%;">CLASS</th> <th style="width: 50%;">AUTHORIZED</th> </tr> <tr> <td>COMMON</td> <td>1,000</td> </tr> </table>	CLASS	AUTHORIZED	COMMON	1,000
CLASS	AUTHORIZED				
COMMON	1,000				
4.) STATE OR COUNTRY OF INCORPORATION: <b>VA</b>					

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 11860 FISHING POINT DRIVE

CITY/ST/ZIP: NEWPORT NEWS, VA 23606

7.) DIRECTORS AND PRINCIPAL OFFICERS: All directors and principal officers must be listed. An individual may be designated as both a director and an officer.

	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: JASON ORION ELLIS		
TITLE: PRESIDENT		
ADDRESS: 1005 NORTH GREEN DRIVE		
CITY/ST/ZIP/CO: NEWPORT NEWS, VA 23602		

	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: LAURA ELLEN VAUGHN ELLIS		
TITLE: S/T		
ADDRESS: 1005 NORTH GREEN DRIVE		
CITY/ST/ZIP/CO: NEWPORT NEWS, VA 23602		

I AFFIRM THAT THE INFORMATION CONTAINED IN THIS ELECTRONIC REPORT IS ACCURATE AND COMPLETE AS OF THE DATE BELOW AND THAT I AM LEGALLY AUTHORIZED TO SIGN THIS REPORT.

/s/ JASON ORION ELLIS	JASON ORION ELLIS, PRESIDENT	3/18/2016
SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	PRINTED NAME AND CORPORATE TITLE	DATE

It is a Class 1 misdemeanor for any person to sign a document, which includes this electronic record, that is false in any material respect with the intent that the document be delivered to the Commission for filing.