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: CHRISTOPHER SCHUK

Electronic Signature of Signing Authorized Person(s) Detail

MEMBER

2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L09000120718

Entity Name: UBF NORTH DAKOTA, LLC

Current Principal Place of Business:

3350 SW 148TH AVE STE 220 MIRAMAR, FL 33027

Current Mailing Address:

PO BOX 4338 HIALEAH, FL 33014

FEI Number: 27-1519414

Name and Address of Current Registered Agent:

SCHUK, CHRISTOPHER 3350 SW 148TH AVE STE 220 MIRAMAR, FL 33027 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

Authorized Person(s) Detail :

Title	MGR	Title	MGR
Name	SCHUK, CHRISTOPHER	Name	GRALNICK, MARC
Address	PO BOX 4338	Address	PO BOX 4338
City-State-Zip:	HIALEAH FL 33014	City-State-Zip:	HIALEAH FL 33014

FILED Mar 03, 2016 Secretary of State CC6112087293

Certificate of Status Desired: No

_____ _____ Date

Date