| Current Prin | cipal Place of Business: CT # W DALE, FL 33308 | | CC3907 | 009916 |
|---|--|-----------------------------------|---|---------------------|
| Current Mai | ling Address: | | | |
| 2121 NE 518 FORT LAUD | ST CT # W ERDALE, FL 33308 US | | | |
| FEI Number: 35-2537158 | | Certificate of Status Desired: No | | |
| Name and A | ddress of Current Registered Agent: | | | |
| RUSTAD, LARS 3100 NORTH O APT 2302 | | | | |
| | DALE, FL 33308 US | | | |
| FORT LAUDER | DALE, FL 33308 US | ts registered office or regis | tered agent, or both, in the State of Flo | rida. |
| FORT LAUDER | | ts registered office or regis | tered agent, or both, in the State of Flo | rida. 01/17/2018 |
| FORT LAUDER | entity submits this statement for the purpose of changing i | ts registered office or regis | tered agent, or both, in the State of Flo | |
| FORT LAUDER The above named SIGNATURE | entity submits this statement for the purpose of changing is | ts registered office or regis | tered agent, or both, in the State of Flo | 01/17/2018 |
| FORT LAUDER The above named SIGNATURE | entity submits this statement for the purpose of changing is LARS RUSTAD Electronic Signature of Registered Agent | ts registered office or regis | tered agent, or both, in the State of Flo | 01/17/2018 |
| FORT LAUDER The above named SIGNATURE | entity submits this statement for the purpose of changing is LARS RUSTAD Electronic Signature of Registered Agent Person(s) Detail : | | | 01/17/2018 |
| FORT LAUDER The above named SIGNATURE Authorized Title | entity submits this statement for the purpose of changing is LARS RUSTAD Electronic Signature of Registered Agent Person(s) Detail : AMBR | Title | MGR | 01/17/2018 |
| FORT LAUDER The above named SIGNATURE Authorized Title Name Address | entity submits this statement for the purpose of changing is LARS RUSTAD Electronic Signature of Registered Agent Person(s) Detail : AMBR RUSTAD, LARS | Title Name Address | MGR QUINLAN, EDWARD | 01/17/2018 |
| FORT LAUDER The above named SIGNATURE Authorized Title Name Address | entity submits this statement for the purpose of changing is ELARS RUSTAD Electronic Signature of Registered Agent Person(s) Detail : AMBR RUSTAD, LARS 3100 NORTH OCEAN BLVD, UNIT 2302 | Title Name Address | MGR QUINLAN, EDWARD P.O.BOX 223 | 01/17/2018 |

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: LARS RUSTAD

PRESIDENT

01/17/2018

Electronic Signature of Signing Authorized Person(s) Detail

2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L15000117114

Entity Name: NORDIC LIQUIDATIONS LLC

FILED Jan 17, 2018 **Secretary of State**

Date