61271

ABSTRACT OF STATEMENT FOR THE YEAR ENDING DECEMBER 31, 2024

10239

SECURA Supreme Insurance Company Total Assets Total Liabilities 6,000,000 Special Surplus Funds

NORTH DAKOTA BUSINESS ONLY

FOR II	1E YEAK 2024
Total Direct Premiums	
Earned	8,061,560
Total Direct Losses	
Incurred	3,046,071
Total Accident and	
Health Direct Premiums	0
Earned	
Total Accident and	
Health Direct Losses	0

STATE OF NORTH DAKOTA OFFICE OF THE COMMISSIONER

OF INSURANCE
I, Jon Godfread, Commissioner of Insurance of the State of North Dakota, do hereby certify that the foregoing is a true Abstract of Statement, as officially filed by the Company in IN TESTIMONY WHEREOF, I have hereunto set my hand and affixed the seal of this office at Bismarck, the first day of March, A.D. 2025 (SEAL).

JON GODFREAD

STATE OF NORTH DAKOTA OFFICE OF THE COMMISSIONER

OFFICE OF THE COMMISSIONER
OF INSURANCE
COMPANY'S CERTIFICATE OF
AUTHORITY
WHEREAS, the above corporation duly organized under
the laws of its state or country of domicile, has filed in this
office a sworn statement exhibiting its condition and business for the year ending December 31, 2024 conformable
to the requirements of the laws of this State regarding the
business of insurance and

WHEREAS, the said company has filed in this office a duly certified copy of its charter with certificate of organization in compliance with the requirements of insurance law afore-

NOW THEREFORE, I, JON GODFREAD, Commi sioner of Insurance of the State of North Dakota, pursuant to the provisions of said laws, do hereby certify that the above amed company is fully empowered through its authorized agents and representatives, to transact its appropriated business of authorized insurance in the state according to the laws thereof, until the 30th day of April, A.D. 2026.

IN TESTIMONY WHEREOF, I have hereunto set my hand and seal at Bismarck this first day of March, A.D., 2025 JON GODFREAD

(5/28, 6/4, 11)

ABSTRACT OF STATEMENT FOR THE YEAR ENDING DECEMBER 31, 2024

of the

SECURA Select Insurance Company 3,000,000 Special Surplus Funds urplus Notes ross Paid in and Contributed Surplus Unassigned funds (surplus) Total Capital and Surplus Total Liabilities, Capital

NORTH DAKOTA BUSINESS ONLY

MORTH DAILO	1111
FOR THE	YE
Total Direct Premiums	
Earned	0
Total Direct Losses	
Incurred	0
Total Accident and	
Health Direct Premiums	0
Earned	
Total Accident and	
Health Direct Losses	0
Incurred	

STATE OF NORTH DAKOTA OFFICE OF THE COMMISSIONER

OF INSURANCE
I, Jon Godfread, Commissioner of Insurance of the State of North Dakota, do hereby certify that the foregoing is a true Abstract of Statement, as officially filed by the Company in IN TESTIMONY WHEREOF. I have hereunto set my hand and affixed the seal of this office at Bismarck, the first day of March, A.D. 2025 (SEAL).

JON GODFREAD

STATE OF NORTH DAKOTA OFFICE OF THE COMMISSIONER OF THE COMMISSIONER OF INSURANCE COMPANY'S CERTIFICATE OF AUTHORITY

WHEREAS, the above corporation duly organized under the laws of its state or country of domicile, has filed in this office a sworm statement exhibiting its condition and business for the year ending December 31, 2024 conformable to the requirements of the laws of this State regarding the business of insurance and

WHEREAS, the said company has filed in this office a duly certified copy of its charter with certificate of organization in compliance with the requirements of insurance law afore-

NOW THEREFORE, I, JON GODFREAD, Comm sioner of Insurance of the State of North Dakota, pursuant to the provisions of said laws, do hereby certify that the above amed company is fully empowered through its authorized agents and representatives, to transact its appropriated business of authorized insurance in the state according to the laws thereof, until the 30th day of April, A.D. 2026.

IN TESTIMONY WHEREOF, I have hereunto set my hand and seal at Bismarck this first day of March, A.D., 2025 (SFAI) JON GODFREAD

FEDORCHAK FORUM:

Join the statewide discussion with

Congresswoman Julie Fedorchak, Julie

will answer questions and discuss key

legislative priorities in real time!

June 10th at 7:00pm CT

Scan the QR code or visit our

website to sign-up to participate.

Fedorchak.house.gov 💢 🕟 @RepFedorchak

CONVERSATIONS WITH CONSTITUENTS!

ABSTRACT OF STATEMENT FOR THE YEAR ENDING DECEMBER 31, 2024 Principal Life Insurance Company

In the state of Iowa Total Assets Total Liabilities Aggregate Write-Ins for special surplus funds Common Capital Stock Preferred Capital Stock Aggregate Write-ins for Other Than 2,500,000 497,207,017 Special Surplus Funds

NORTH DAKOTA BUSINESS ONLY

239,799,143,111

FOR THE	YEAR 2024
Total Life and	
Annuity Premiums Written	93,724,455
Total Life and	
Annuity Direct Losses Paid	17,414,923
Total Accident and	
Health Direct Premiums	7,453,851
Written	
Total Accident and	
Health Direct Losses Paid	3,847,305

STATE OF NORTH DAKOTA OFFICE OF THE COMMISSIONER OF INSURANCE

I, Jon Godfread, Commissioner of Insurance of the State of North Dakota, do hereby certify that the foregoing is a true Abstract of Statement, as officially filed by the Company in IN TESTIMONY WHEREOF, I have hereunto set my hand and affixed the seal of this office at Bismarck, the first day of March, A.D. 2025 (SEAL).

STATE OF NORTH DAKOTA OFFICE OF THE COMMISSIONER OF INSURANCE COMPANY'S CERTIFICATE OF

AUTHORITY
WHEREAS, the above corporation duly organized under the laws of its state or country of domicile, has filed in this office a swo rists trate or country of comincie, has filted in this office a sworn statement exhibiting its condition and business for the year ending December 31, 2024 conformable to the requirements of the laws of this State regarding the business of insurance and WHEREAS, the said company has filed in this office a duly certified copy of its charter with certificate of organization

n compliance with the requirements of insurance law afore-

NOW THEREFORE, L. JON GODFREAD, Commis sioner of Insurance of the State of North Dakota, pursuant to the provisions of said laws, do hereby certify that the above named company is fully empowered through its authorized agents and representatives, to transact its appropriated business of authorized insurance in the state according to the laws thereof, until the 30th day of April, A.D. 2026.

IN TESTIMONY WHEREOF, I have hereunto set my hand and seal at Bismarck this first day of March, A.D., 2025 (SEAL) JON GODFREAD

(5/28, 6/4, 11)

NOTICE OF MOTION TO MODIFY

STATE OF NORTH DAKOTA IN DISTRICT COURT COUNTY OF **DIVIDE NORTHWEST JUDICIAL DISTRICT**

Laramie Lee Gilbertson,

Plaintiff,

Tracy Ann Gilbertson n/k/a Tracy Ann Callahan, **Defendant**

Civil No. 12-2021-DM-00005 YOU ARE HEREBY GIVEN NOTICE that the Motion to Modify is being brought before the Court for determination pursuant to Rule 3.2 of the North Dakota Rules of Court. The motion will be decided on briefs unless oral argument is timely requested. You have fourteen (14) days after service upon you of the Motion within which to serve and file a response to the Motion. Failing to do so may be deemed an admission that, in the opinion of party or

counsel, the motion is meritorious. Dated this 12th day, of May, 2025. /s/ Jacob D. Marburger Jacob D. Marburger #06609 Attorney for the Plaintiff Neff Law, P.C. 111 East Broadway P.O. Box 1526 Williston, North Dakota 58802-1526 (701) 577-2000 jdm@nefflawnd.com

NOTICE OF HEARING

Patrick G.N. Beddow #07456 Karell Kimmet Beddow PLLP 175 North 27th Street, Suite 1303 Billings, Montana 59101 406-294-8484 pbeddow@kkblawmt.com Attorneys for Petitioner Probate No. 12-2025-PR-00062

IN THE DISTRICT COURT, OF DIVIDE COUNTY, STATE OF NORTH DAKOTA In the Matter of the Estate of Carole E. Martinez

Deceased. **NOTICE OF HEARING ON PETITION FOR** FORMAL PROBATE OF WILL, **DETERMINATION OF TESTACY AND HEIRS AND** APPOINTMENT OF PERSONAL **REPRESENTATIVES**

NOTICE IS HEREBY GIVEN, LAURIE MARTINEZ, Petitioner, has filed in the above Court and cause a Petition for Formal Probate of Will and Appointment of Personal Representative for the Estate of CAROLE E. MARTINEZ. For further information, the Petition, as filed, may be examined in the office of the clerk

of the above Court. Hearing upon said Petition will be held in said Court at the Courtroom of the Divide County Courthouse, Crosby, North Dakota, on the 11th day of July, 2025 at the hour of 11:00 a.m., at which time all interested persons may appear and object.
Dated this 29th, day of May, 2025.

/s/ Patrick G.N. Beddow Patrick G.N. Beddow, ND Bar #07456 Karell Kimmet Beddow PLLP

71161

ABSTRACT OF STATEMENT FOR THE YEAR ENDING DECEMBER 31, 2024

of the

2,500,000

1,484,726,592.79

12,051,480.77

NORTH DAKOTA BUSINESS ONLY FOR THE YEAR 2024

STATE OF NORTH DAKOTA

OFFICE OF THE COMMISSIONER

OF INSURANCE

I, Jon Godfread, Commissioner of Insurance of the State of North Dakota, do hereby certify that the foregoing is a true Abstract of Statement, as officially filed by the Company in

IN TESTIMONY WHEREOF, I have hereunto set my hand

and affixed the seal of this office at Bismarck, the first day of

STATE OF NORTH DAKOTA

OFFICE OF THE COMMISSIONER OF INSURANCE

COMPANY'S CERTIFICATE OF

AUTHORITY
WHEREAS, the above corporation duly organized under the laws of its state or country of domicile, has filed in this

office a sworn statement exhibiting its condition and business for the year ending December 31, 2024 conformable to the requirements of the laws of this State regarding the business of insurance and WHEREAS, the said company has filed in this office a duly certified copy of its charter with certificate of organization

in compliance with the requirements of insurance law afore-

sioner of Insurance of the State of North Dakota, pursuant to the provisions of said laws, do hereby certify that the above named company is fully empowered through its authorized

agents and representatives, to transact its appropriated business of authorized insurance in the state according to the liess of administrated insurance in the state according to the laws thereof, until the 30th day of April, A.D. 2026.

IN TESTIMONY WHEREOF, I have hereunto set my hand and seal at Bismarck this first day of March, A.D., 2025

NOW THEREFORE, I. JON GODFREAD, Comm

Annuity Direct Losses Paid 357,087.60 Total Accident and

Principal National Life Insurance Company

In the state of Iowa

Special Surplus Funds

Total Life and

Health Direct Premiums Health Direct Losses Paid

March. A.D. 2025 (SEAL).

JON GODFREAD

(SEAL) JON GODFREAD

(5/28, 6/4, 11)

SECURA Insurance Compan Total Assets Total Liabilities

Aggregate write-ins for special surplus funds Common Capital Stock Preferred Capital Stock Aggregate Write-ins for Other Than 3,000,000 Special Surplus Funds 125,000,000 Surplus Notes Gross Paid in and 1,909,920,545

NORTH DAKOTA BUSINESS ONLY

ABSTRACT OF STATEMENT FOR THE YEAR ENDING DECEMBER 31, 2024

FOR THE	YEAR 20
Total Direct Premiums	
Earned	8,061,560
Total Direct Losses	
Incurred	3,046,071
Total Accident and	
Health Direct Premiums	0
Earned	
Total Accident and	
Health Direct Losses	0

STATE OF NORTH DAKOTA OFFICE OF THE COMMISSIONER

OF INSURANCE

I, Jon Godfread, Commissioner of Insurance of the State of North Dakota, do hereby certify that the foregoing is a true Abstract of Statement, as officially filed by the Company in IN TESTIMONY WHEREOF. I have hereunto set my hand and affixed the seal of this office at Bismarck, the first day of March, A.D. 2025 (SEAL).

JON GODFREAD

STATE OF NORTH DAKOTA OFFICE OF THE COMMISSIONER OF INSURANCE OF INSURANCE COMPANY'S CERTIFICATE OF AUTHORITY WHEREAS, the above corporation duly organized under

where As, the above comparation duty organized unter the laws of its state or country of domicile, has filed in this office a sworn statement exhibiting its condition and business for the year ending December 31, 2024 conformable to the requirements of the laws of this State regarding the business of insurance and WHEREAS, the said company has filed in this office a duly critified only of its observation of the protection of the protection

certified copy of its charter with certificate of organization in compliance with the requirements of insurance law afore-

NOW THEREFORE, I, JON GODFREAD, Com sioner of Insurance of the State of North Dakota, pursuant to the provisions of said laws, do hereby certify that the above named company is fully empowered through its authorized agents and representatives, to transact its appropriated business of authorized insurance in the state according to the laws thereof, until the 30th day of April, A.D. 2026.

IN TESTIMONY WHEREOF, I have hereunto set my hand and seal at Bismarck this first day of March, A.D., 2025 JON GODEREAD

ABSTRACT OF STATEMENT FOR THE YEAR ENDING DECEMBER 31, 2024

Care Improvement Plus In the state of Nebraska

Total Assets Total Liabilities 9,346,045,935 4,988,356,457 Aggregate write-ins for special surplus funds Common Capital Stock Preferred Capital Stock Aggregate Write-ins for Other Than 2,000,000 Special Surplus Funds Surplus Notes Gross Paid in and Contributed Surplus Unassigned funds (surplus) Total Capital and Surplus Total Liabilities, Capital 9,346,045,935

NORTH DAKOTA BUSINESS ONLY

FOR TH	IE YEAR 2024
Total Direct Premiums	
Earned	93,027,962
Total Direct Losses	
Incurred	84,414,468
Total Accident and	
Health Direct Premiums	93,602,541
Earned	
Total Accident and	04 414 460
Health Direct Losses	84,414,468

STATE OF NORTH DAKOTA

OFFICE OF THE COMMISSIONER OF INSURANCE I, Jon Godfread, Commissioner of Insurance of the State of North Dakota, do hereby certify that the foregoing is a true Abstract of Statement, as officially filed by the Company in

IN TESTIMONY WHEREOF, I have hereunto set my hand and affixed the seal of this office at Bismarck, the first day of March, A.D. 2025 (SEAL).

JON GODFREAD

STATE OF NORTH DAKOTA OFFICE OF THE COMMISSIONER OF INSURANCE COMPANY'S CERTIFICATE OF AUTHORITY

WHEREAS, the above corporation duly organized under the laws of its state or country of domicile, has filed in this office a sworn statement exhibiting its condition and busi-ness for the year ending December 31, 2024 conformable to the requirements of the laws of this State regarding the business of insurance and

WHEREAS, the said company has filed in this office a duly certified copy of its charter with certificate of organization in compliance with the requirements of insurance law afore-

NOW THEREFORE, I, JON GODFREAD, Comm sioner of Insurance of the State of North Dakota, pursuant to the provisions of said laws, do hereby certify that the above amed company is fully empowered through its authorized agents and representatives, to transact its appropriated business of authorized insurance in the state according to the laws thereof, until the 30th day of April, A.D. 2026.

IN TESTIMONY WHEREOF, I have hereunto set my hand and seal at Bismarck this first day of March, A.D., 2025 (CEAL)

JON GODFREAD

(5/28, 6/4, 11)

ABSTRACT OF STATEMENT FOR THE YEAR ENDING DECEMBER 31, 2024 UnitedHealthcare Insurance Comp Total Assets Total Liabilities Aggregate write-ins for special surplus funds Common Capital Stock 3,000,000 Preferred Capital Stock Aggregate Write-ins for Other Than Special Surplus Funds Surplus Notes Gross Paid in and

NORTH DAKOTA BUSINESS ONLY

558,595,764

FOR THE	E YEAR 2024
Total Direct Premiums	
Earned	43,908,403
Total Direct Losses	
Incurred	33,223,669
Total Accident and	
Health Direct Premiums	43,219,699
Earned	
Total Accident and	
Health Direct Losses	32,661,030

Contributed Surplus Unassigned funds (surplus)

STATE OF NORTH DAKOTA

OFFICE OF THE COMMISSIONER
OF INSURANCE
I, Jon Godfread, Commissioner of Insurance of the State of
North Dakota, do hereby certify that the foregoing is a true Abstract of Statement, as officially filed by the Company in IN TESTIMONY WHEREOF, I have hereunto set my hand and affixed the seal of this office at Bismarck, the first day of March, A.D. 2025 (SEAL).

JON GODFREAD

Sioner of Insurance STATE OF NORTH DAKOTA OFFICE OF THE COMMISSIONER OF INSURANCE COMPANY'S CERTIFICATE OF AUTHORITY FAS. the above corporation duly expansive

WHEREAS, the above corporation duly organized under the laws of its state or country of domicile, has filed in this office a sworn statement exhibiting its condition and busi-ness for the year ending December 31, 2024 conformable to the requirements of the laws of this State regarding the business of insurance and

WHEREAS, the said company has filed in this office a duly certified copy of its charter with certificate of organization in compliance with the requirements of insurance law afore

NOW THEREFORE, I, JON GODFREAD, Commis sioner of Insurance of the State of North Dakota, pursuant to the provisions of said laws, do hereby certify that the above amed company is fully empowered through its authorized agents and representatives, to transact its appropriated business of authorized insurance in the state according to the laws thereof, until the 30th day of April, A.D. 2026.

IN TESTIMONY WHEREOF, I have hereunto set my hand and seal at Bismarck this first day of March, A.D., 2025 (SEAL).

62286

JON GODFREAD

(5/28, 6/4, 11)

12567

ABSTRACT OF STATEMENT FOR THE YEAR ENDING DECEMBER 31, 2024

Golden Rule Insurance Co. Total Assets Total Liabilities Aggregate write-ins for special surplus funds Common Capital Stock Preferred Capital Stock Aggregate Write-ins for Other Than 3,262,704 Special Surplus Funds Surplus Notes Gross Paid in and Contributed Surplus Unassigned funds (surplu Total Capital and Surplus Total Liabilities, Capital

NORTH DAKOTA BUSINESS ONLY

Total Direct Premiums	
Earned	34,271
Total Direct Losses	
Incurred	175,564
Total Accident and	
Health Direct Premiums	226,317
Earned	
Total Accident and	
Health Direct Losses	133,327
Incurred	

STATE OF NORTH DAKOTA OFFICE OF THE COMMISSIONER OF INSURANCE

I, Jon Godfread, Commissioner of Insurance of the State of North Dakota, do hereby certify that the foregoing is a true Abstract of Statement, as officially filed by the Company in

IN TESTIMONY WHEREOF I have hereunto set my hand and affixed the seal of this office at Bismarck, the first day of March, A.D. 2025 (SEAL).

JON GODFREAD

STATE OF NORTH DAKOTA OFFICE OF THE COMMISSIONER

OFFICE OF THE COMMISSIONER
OF INSURANCE
COMPANY'S CERTIFICATE OF
AUTHORITY
WHEREAS, the above corporation duly organized under
the laws of its state or country of domicile, has filed in this office a sworn statement exhibiting its condition and business for the year ending December 31, 2024 conformable to the requirements of the laws of this State regarding the business of insurance and

WHEREAS, the said company has filed in this office a duly certified copy of its charter with certificate of organization in compliance with the requirements of insurance law afore

NOW THEREFORE, I, JON GODFREAD, Commis sioner of Insurance of the State of North Dakota, pursuant to the provisions of said laws, do hereby certify that the above amed company is fully empowered through its authorized agents and representatives, to transact its appropriated business of authorized insurance in the state according to the laws thereof, until the 30th day of April, A.D. 2026.

IN TESTIMONY WHEREOF, I have hereunto set my hand and seal at Bismarck this first day of March, A.D., 2025 (SEAL)

JON GODFREAD

NOTICE OF HEARING

Kimberly A. Backman # 06952 CROWLEY FLECK PLLP 100 W. Broadway, Suite 250 P.O. Box 2798 Bismarck, ND 58502-2798 (701) 223-6585

kbackman@crowleyfleck.com Attorneys for Personal Representative Probate No. 12-2025-PR-00064 IN THE DISTRICT COURT,

OF DIVIDE COUNTY, STATE OF NORTH DAKOTA In the Matter of the Estate of

Pearl A. Wigness Deceased. **NOTICE OF HEARING**

ON APPLICATION FOR FORMAL **PROBATE OF WILL** AND FORMAL **APPOINTMENT OF PERSONAL**

REPRESENTATIVE NOTICE IS HEREBY GIVEN that Troy Elliott, has filed herein an Application for Formal Probate of Will and Formal Appointment of Personal Representative.

Hearing has been set upon said application before the Honorable Robin Schmidt, Judge of the Divide County District Court, Northwest Judicial District, on the 11th day of July, 2025, at 11:00 a.m., at the Divide County Courthouse in the City of Crosby, County of Divide, State of North Dakota.

Dated this 22nd, day of May, 2025.

/s/ Kimberly A. Backman Kimberly A. Backman ND #06952 CROWLEY FLECK, PLLP Attorneys for Personal Representative 100 West Broadway, Suite 250 P.O. Box 2798

Bismarck, North Dakota 58502-2798

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