

|  |                |   |            |  |         |             |  |
|--|----------------|---|------------|--|---------|-------------|--|
| No. <b>W 70685</b>   |                | <b>Due no later than Jan 31, 2016</b>   |            | 2. Registered Agent and Address <b>(NO PO BOX)</b>                       |         |             |  |
| Return to:<br>SECRETARY OF STATE<br>700 WEST JEFFERSON<br>PO BOX 83720<br>BOISE, ID 83720-0080<br><br><b>NO FILING FEE IF<br/>RECEIVED BY DUE DATE</b> |                | <b>Annual Report Form</b>   |            | LARALEE FLINT<br>123 NORTH 7TH STREET<br>BASEMENT<br>MONTPELIER ID 83254 |         |             |  |
|  |                | <b>1. Mailing Address: Correct in this box if needed.</b><br>GO BLUE LLC<br>LARA LEE OLSEN<br>P.O. BOX 261<br>GEORGETOWN ID 83239 |            | 3. <u>New</u> Registered Agent Signature:*                               |         |             |  |
| 4. Limited Liability Companies: Enter Names and Addresses of at least one Member or Manager.   |                |   |            |  |         |             |  |
| Office Held  | Name           | Street or PO Address  | City       | State  | Country | Postal Code |  |
| MANAGER  | LARA LEE OLSEN | PO BOX 261  | GEORGETOWN | ID   | USA     | 83239       |  |
| MANAGER  | RYAN L OLSEN   | PO BOX 261  | GEORGETOWN | ID   | USA     | 83239       |  |
| 5. Organized Under the Laws of:<br><br><b>ID<br/>W 70685</b>   |                | 6. Annual Report must be signed.*<br>Signature: Lara Lee Olsen<br>Name (type or print): Lara Lee Olsen                            |            |  |         |             |  |
|  |                | Date: 01/20/2016<br>Title: Manager  |            |  |         |             |  |
| Processed 01/20/2016   |                | * Electronically provided signatures are accepted as original signatures.   |            |  |         |             |  |