No. <b>W 70685</b> Return to:		Due no later than Jan 31, 2010 Annual Report Form  1. Mailing Address: Correct in this box if needed.  GO BLUE LLC LARA LEE OLSEN P.O. BOX 9 PARIS ID 83261 USA		2. Registered Agent and Address (NO PO BOX)  LARALEE FLINT				
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080					910 SOUTH HWY 89 FISH HAVEN ID 83287  3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE								
4. Limited Liability Compa	nies: Enter Na	mes and Addresses of	at least one Member or Manager.					
Office Held	Name		Street or PO Address		City	State	Country	Postal Code
MANAGER	LARA LEE O	LSEN	PO BOX 9		PARIS	ID	USA	83261
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID W 70685		Signature: Lara Lee Olsen			Date: 12/03/2009			
		Name (type or print): Lara Lee Olsen			Title: Member			
Processed 12/03/2009 * Electronically provided signatures are accepted as original signatures.								