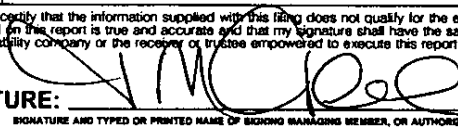


FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

08 MAY 23 AM 8:25

**2008 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

DOCUMENT # L01000004017			
1. Entity Name BLUE LLC			
Principal Place of Business 6500 N ATLANTIC AVE STE B CAPE CANAVERAL, FL 32920	Mailing Address 6500 N ATLANTIC AVE STE B CAPE CANAVERAL, FL 32920		
DO NOT WRITE IN THIS SPACE			
		01042008 No Chg-LLC CR2E083 (12/07)	
		4. FEI Number NOT APPLICABLE	Applied For Not Applicable
		5. Certificate of Status Desired ☐	\$5.00 Additional Fee Required
6. Name and Address of Current Registered Agent GREENE, JANICE M 6500 N ATLANTIC AVE, STE B CAPE CANAVERAL, FL 32920		DO NOT WRITE IN THIS SPACE	
8. 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. I am familiar with, and accept the obligations of registered agent.			
SIGNATURE _____ Signature typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE			
FILE NOW!!! FEE IS \$138.75 After May 1, 2008 Fee will be \$538.75			
9. MANAGING MEMBERS/MANAGERS		DO NOT WRITE IN THIS SPACE	
TITLE NAME STREET ADDRESS CITY- ST- ZIP	MGRM GREENE INTERNATIONAL DEVELOPMENT CORP 6500 W ATLANTIC AVE STE C CAPE CANAVERAL, FL 32920		
TITLE NAME STREET ADDRESS CITY- ST- ZIP			
TITLE NAME STREET ADDRESS CITY- ST- ZIP			
TITLE NAME STREET ADDRESS CITY- ST- ZIP			
TITLE NAME STREET ADDRESS CITY- ST- ZIP			
TITLE NAME STREET ADDRESS CITY- ST- ZIP			
11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated in this report is true and accurate and that my 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 608, Florida Statutes.			
SIGNATURE: 		4/24/08 (321) 799-0799	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE		Date Daytime Phone #	

300130101423
05/23/08--01007--011 **1948.75