

2010 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L09000079181

FILED
Feb 16, 2010
Secretary of State

Entity Name: BLU INSURANCE GROUP LLC

Current Principal Place of Business:

1752 OAK POND CT
OLDSMAR, FL 34677

New Principal Place of Business:

Current Mailing Address:

1752 OAK POND CT
OLDSMAR, FL 34677

New Mailing Address:

FEI Number:

FEI Number Applied For (X)

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JAIMIN, PATEL
1752 OAK POND
OLDSMAR, FL 34677 US

Name and Address of New Registered Agent:

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.

SIGNATURE: _____

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM
Name: JMJ INSURANCE SERVICE
Address: 1752 OAK POND
City-St-Zip: OLDSMAR, FL 34677

I hereby certify that the information indicated on this 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 608, Florida Statutes.

SIGNATURE: JAIMIN PATEL

MGRM

02/16/2010

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date