No. <b>W 13143</b>		Due no later than Oct 31, 2011		2. Registered Ag	2. Registered Agent and Address (NO PO BOX)			
Return to:		Annual Report Form			CARYL RAE WILSON			
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address: Correct in this box if needed.  DESERT WINDS ARABIANS, LLC CARYL R WILSON 3340 MERLIN DR #200 IDAHO FALLS ID 83404		IDAHO FALLS	3340 MERLIN DR #200 IDAHO FALLS ID 83404  3. New Registered Agent Signature:*			
NO FILING FEE IF RECEIVED BY DUE DATE		USA						
4. Limited Liability Cor	mpanies: Enter Nai	mes and Addresse	s of at least one Member or Manager.					
Office Held	Name		Street or PO Address	City	State	Country	Postal Code	
MANAGER	CARYL R. WILSON		3340 MERLIN DRIVE #200	IDAHO FALLS	ID	USA	83404	
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID		Signature: Richard K Hale			Date: 11/17/2011			
W 13143		Name (type or		Title: CPA				
Processed 11/17/2011 * Electronically provided signatures are accepted as original signatures.								