2005 LIMITED LIABILITY COMPANY REINSTATEMENT

FILED
Nov 16, 2005
Secretary of State

DOCUMENT# M04000005345

Entity Name: IHG MANAGEMENT(MARYLAND) LLC

Current Principal Place of Business:

8844 COLUMBIA 100 PARKWAY
COLUMBIA, MD 21045

New Principal Place of Business:

Current Mailing Address:

8844 COLUMBIA 100 PARKWAY
COLUMBIA, MD 21045

New Mailing Address:

FEI Number: 33-1103985 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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: JENNIFER F. AULTMANN, ASSISTANT SECRETARY

Electronic Signature of Registered Agent — Date

MANAGING MEMBERS/MANAGERS:

Title: MGR ( ) Delete
Name: HOM, DAVID A
Address: 8844 COLUMBIA 100 PARKWAY
City-St-Zip: COLUMBIA, MD 21045

Title: MGR ( ) Delete
Name: MURRAY, THOMAS P
Address: THREE RAVINIA DRIVE STE. 100
City-St-Zip: ATLANTA, GA 30346

Title: MGR ( ) Delete
Name: PORTER, STEVAN D
Address: THREE RAVINIA DRIVE STE. 100
City-St-Zip: ATLANTA, GA 30346

ADDITIONS/CHANGES:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further 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: DAVID A. HOM MGR 11/16/2005

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