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To:

Division of Corporations

Fax Number : (850)205-0383

From:

SUZANNE M. McLAUGHLIN

Account Name : CNL FINANCIAL GROUP, INC.

Account Number : 113615003626 Phone : (407)650-1000 Fax Number : (407)650-1065 AL

FOREIGN LIMITED LIABILITY COMPANY

CNL IHC, LLC

Certificate of Status	1
Certified Copy	1
Page Count	01
Estimated Charge	\$160.00

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FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

October 22, 2001

CNL FINANCIAL GROUP, INC.

SUBJECT: CNL IEC, LLC REF: W01000024345 SECRETARY OF 22

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

Thank you for submitting your certificate from Delaware. You must still provide the registered agent designation, as requested in our previous letter.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6958.

Lee Rivers Document Specialist

FAX Aud. #: H01000108489 Letter Number: 001A00058049

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APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 608503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA: CNL IHC, LLC (Name of foreign limited liability company) Delaware (Jurisdiction under the law of which foreign limited liability company is organized) 4, __10/10/2001 Perpetual
(Duration: Year limited liability company will cease to exist or "perpetual") (Date of Organization) Upon qualification (Date first transacted business in Florida. (See sections 608.501, 608.502, and 817.155, F.S.) 7. 450 S. Orange Avenue, Orlando FL 32801 (Street address of principal office) 8. If limited liability company is a manager-managed company, check here The usual business addresses of the managing members or managers are as follows: CNL Hospitality Properties, Inc., 450 S. Orange Ave, Orlando FL 32801 10. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in the jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, a translation of the certificate under each of the translator must be submitted.) 11. Nature of business or purposes to be conducted or promoted in Florida: ____ Owns general partner interest in CNL IHC Partners, LP CNL Hospitality Properties, Inc., as Member Suan Strulland Signature of a member or an authorized representative of a member. (In accordance with section 608.408(3), F.S., the execution of this document constitutes

an affirmation under the penalties of perjury that the facts stated herein are true.)

Typed or printed name of signee

C. Brian Strickland, SVP of Finance & Administration, of Member

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CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

1. The name of	the Limited Liability Company is:	
CNL IHC,	LLC	
2. The name and	I the Florida street address of the registered agent and office are:	TALLAH
	C. Brian Strickland	0.0
	(Name)) 130 001 2
	450 S. Orange Avenue	FLORIDA 22
	Florida street address (P.O. Box <u>NOT</u> ACCEPTABLE)	Ä
	Orlando FL 32801	
	(City/State/Zip)	

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S.

C. Brian Struetland
(Signature)

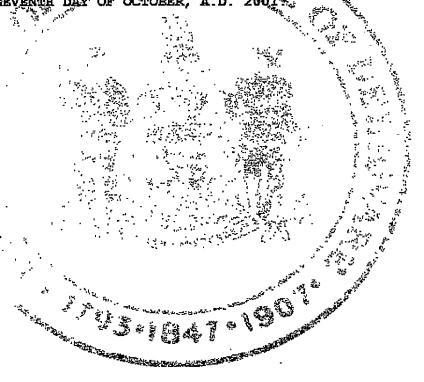
\$ 100.00 Filing Fee for Application
\$ 25.00 Designation of Registered Agent
\$ 30.00 Certified Copy (optional)
\$ 5.00 Certificate of Status (optional)

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State of Delaware

Office of the Secretary of State PAGE 1

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "CNL IHC, LLC" IS DULY FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW,





Harriet Smith Windson, Secretary of State

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AUTHENTICATION: 1385309

DATE: 10-11-01

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