Division of Corporations

Page 1 of 1

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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To:

Division of Corporations

Fax Number : (850) 617-6383

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023 Phone : (850)222~1092 Fax Number : (850)878~5368

**Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please

Email Address:

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN IA LODGING MANAGEMENT, LLC

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$25.00

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S. YOUNG

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Corporate Filing Menu

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COVER LETTER

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TO: Registration Section Division of Corporations				
SUBJECT: IA Lodging Management, LLC				
	Limited Liability (Сотрапу		
Dear Sir or Madam:			-	
The enclosed application, certificate and fee(s) a	re submitted for fil	ng.		
		_		
Please return all correspondence concerning this	matter to the follow	ving;		
Kim Band				
Name of Person				
IA Lodging Management, LLC Firm/Company				
Pathocompany				
2901 Butterfield Road			ZX.	ļ
Address			三萬	2
Oak Brook 11 40573			罗亚	ති (S)
Oak Brook, 3L 60523 City/State and Zip Code			(7)** [:1 ***- - :1 /**	26
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kim.band@inlandamerican.com			<u></u>	ΙŞ
E-mail address: (to be used for future annual r	eport helification)		61	23
), T. M.	10
For further information concerning this matter, p	lease cail:			
Kim Bund	nt (630 570			
Name of Person	Area Code & Da	lytime Telephone Number		
STREET/COURIER ADDRESS: Registration Section Division of Corporations	Re	AILING ADDRESS: gistration Section vision of Corporations		
Clifton Building 2661 Executive Conter Circle Tallahassee, Florida 32301	P.6	P.O. Box 6327 Tallahassee, Florida 32314		
Enclosed is a check for the following amount: Q \$25 Filing Fee Q \$30 Filing Fee & Certificate of Status CR2E055 (12/13)	S55 Filing Fee Centified Copy	& □ \$60 Filing Fee, Certificate of Status & Certified Copy	;	
CUTEGO) (1813)				

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APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY TO FILE AMENDMENT TO CERTIFICATE OF AUTHORITY TO TRANSACT BUSINESS IN FLORIDA

SECTION I (1-3 must be completed)

١.	Name of limited liability Company as it appears on the records of the Florida Department of State: IA Lodging Management, LLC					
2.	Jurisdiction of its organization: Delaware					
3.	Date authorized to do business in Florida: December 12, 2013					
SI	ECTION II (4-7 complete only the applicable changes)					
4.	. New name of the limited liability company: XHR Management, LLC					
	(must contain "Limited Liability Company, ""LLC," or "LLC.")					
βħ tha	name unavailable, enter alternate name adopted for the purpose of transacting business in orida and attach a copy of the written consent of the managers or managing members adopting a alternate name. The alternate name must contain "Limited Liability Company," "L.L.C." "LLC.")					
5.	If the amendment changes the jurisdiction of organization, indicate new jurisdiction:					
6.	If the amendment changes person, title or capacity in accordance with 605.0902 (1)(e), indicate that change:					
7.	Attached is an original certificate, if required: no more than 90 days old, evidencing the aforementioned amendment(s), duly authenticated by the official having oustody of records in the jurisdiction under the law of which this entity is organized.					
	Auglinature of the application to the second	=				
	Nicole Grimmidi, Secretary of Inland Aserican Winston Notels, Inc., a DE corp., the General Partner of WINN Limited Fartnership, a HC LP, the sole member	SONY				
	Typed or printed name of signee	ව	,			
	Filing Pce: \$25.00	77 ma	1			
		, E 17:	`			

Delaware

PAGE 1

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY THAT THE SAID "IA LODGING MANAGEMENT, LLC", FILED A CERTIFICATE OF AMENDMENT, CHANGING ITS NAME TO "XHR MANAGEMENT, LLC", THE SIXTH DAY OF AUGUST, A.D. 2014, AT 4:12 O'CLOCK P.M.

14 AUS 28 7/1/12: 05
SECRETARY FINANCE
TALLATIA SSEEL FINANCE

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141107761

You may varify this certificate online at corp.delevere.gov/authver.shtml

AUTHENTY CATION: 1646685

DATE: 08-25-14