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COVER LETTER

TO: Registration Section

Divi	sion of Corporations				
cup in cor	Stratus Real Property, LLC				
SUBJECT:	Name of Limited Liability Company				
Dear Sir or i	Madam;				
The enclosed	d Registered Agent/Registered Off	ice Change and	fee(s) are submitted for filing.		
Please return	all correspondence concerning th	is matter to the	following:		
Brian W. I	Hoffman				
	Name of Person				
Carver Da	arden				
	Firm/Company				
801 W. Ro	omana Street, Suite A				
	Address		<u> </u>		
Pensacola	a, FL 32502				
	City/State and Zip Code				
bhoffman(@carverdarden.com				
E-mail	address: (to be used for future and	nual report notif	ication)		
For further i	nformation concerning this matter	, please call:			
Brian W. H	Hoffman	850	266-2312		
	Name of Person	** (Area Code & Daytime Telephone Number		
Reg Divi Cliff 266	REET/COURIER ADDRESS: istration Section ision of Corporations ton Building 1 Executive Center Circle ahassee, Florida 32301	Re Dir P.C	atting address: gistration Section vision of Corporations D. Box 6327 liahassee, Florida 32314		
Enc	losed is a check for the following	ζ amount:			
□ \$	25 Filing Fee	□ \$:	55 Filing Fee & Certified Copy		
INHS18 (2/1-	1)				

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 605.0114 or 605.0116, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1. Na	ome of the limited liability company: Stratus Real	l Property, LLC	
2. (a)	Stratus Real Property, LLC	(b) Stratus Real Property, LLC	
(u)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	
	175 Fox Road	175 Fox Road	
	Pensacola, FL 32504	Pensacola, FL 32504	
	08/31/2015	L15000145596	
3.	Date of filing/registration in Florida	4. Document number	
5. (a)	Rebecca D. Cox		
J. (11)	Registered Agent and Registered Office shown on the records of	of the Florida Dept. of State:	
	Registered Office Address (MUST BE FLORIDA STREET) 2406 N 12th Ave	T ADDRESS)	
	Pensacola, FI	-L 32503	
(b)	Brian W. Hoffman	2019	
(0)	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u>	ed Office address:	
	NEW Registered Office Address:	12:	
	801 W. Romana Street, Suite A	PH 12: :22	
	Pensacola, FI	_{FL} 32502	
the cha agent v was/we	inge or changes are made, the Florida street address o will be identical. Or, in the case of a Florida limited I		ered)
(Le	ture of a member or authorized representative of a member	Rebecca D. Cox Printed or typed name of signee	
I herei provisi the obl to mero notified	by accept the appointment as registered agent and ag ons of all statutes relative to the proper and complete	gree to act in this capacity. I further agree to comply with te performance of my duties, and I am familiar with and ac ded for in Chapter 605, F.S. Or, if this document is being f I hereby confirm that the limited liability company has bee	cept