P09000000155

(Requestor's Name)					
(Address)					
(Address)					
(City/State/Zip/Phone #)					
PICK-UP WAIT MAIL					
(Business Entity Name)					
(Document Number)					
Certified Copies Certificates of Status					
Special Instructions to Filing Officer:					

Office Use Only



100199801261

04/04/11--01025--007 **35.00



Rochange News 4-5-11

COVER LETTER

	ent Section of Corporations					
SUBJECT: Me	etropole Construction, Inc	c. dba Castle Harbour Horn Corporation				
DOCUMENT N	UMBER: PC	9000000155				
The enclosed Stat	ement of Change of Registered Of	fice/Agent and fee are submitted for filing.				
Please return all c	orrespondence concerning this ma	tter to the following:				
Dennis Miehle						
Name of Contact Person						
		nc. dba Castle Harbour Homes /Company				
		- Company				
	12801 Comme	erce Lakes Drive #6				
		ddress				
Fort Myers, FL 33913						
City/State and Zip Code						
metropoleinc@comcast.net						
E-mail address: (to be used for future annual report notification)						
For further inform	nation concerning this matter, plea	se call:				
	Dennis Miehle	et (239) 275-7653				
N	ame of Contact Person	at (239) 275-7653 Area Code & Daytime Telephone Number				
Enclosed is a \$35	.00 check made payable to the Dep	partment of State.				
	Mailing Address: Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address: Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle				

Tallahassee, FL 32301

·**TO:**

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

statement of cha	provisions of sections 607.0 ange is submitted for a corp er to change its registered of	oration organized	under the laws of the Sta	te of Florida
	the corporation: Metropo			•
	office address: 12801 Co			rs, FL 33913
3. The mailing a	address (if different):			
4. Date of incor	poration/qualification:	1/1/2009	Document number:	P0900000155
	d street address of the currer rtment of State: (If resigned,		and registered office on t	file with the
	John D Miehle			
	1721 SE 10th Streee	t		
	Cape Coral, FL 3399	0		78 3
6. The name and (if changed):	d street address of the new re	egistered agent (if	changed) and /or register	TILED STATE STATE STATE
	John D Miehle			
	12801 Commerce La	kes Drive #6	and the second s	- CAIE
	Fort Myers, FL 33913		ріаоте	7
The street address changed will	ess of its registered office a be identical.	and the street add	ress of the business offic	e of its registered agent,
Such change was	as authorized by resolution ne board) or the corporation	duly adopted by has been notifie	its board of directors or	by an officer so
	e of an officer or director		Printed or typed nam	` مدا
I hereby accept I further agree of of my duties, an document is bei corporation has	the appointment as registe to comply with the provision of I am familiar with and a ing filed merely to reflect a s beet notified in writing o	ered agent and ag ons of all statutes ocept the obligati change in the re f this change.	ree to act in this capacil relative to the proper ar ion of my position as reg gistered office address, i	ly. Id complete performance Vistered agent. Or, if this I hereby confirm that the
Sig	nature of Registered Agent		3.28.11	
If signing on be	half of an entity:			
Dennis	s Hiewle yped or Printed Name	<u>_</u>		

* * * FILING FEE: \$35.00 * * *