

L1500005851n

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

(Business Entity Name)

03/28/16--01025--024    \*\*25.00

(Document Number)

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FLORIDA

MAR 29 2016

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## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Gaviant  
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Charles John

Name of Person

Firm/Company

311 Bonnlyn Drive

Address

Orange Park, FL, 32073

City/State and Zip Code

catanuba24@gmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Charles John 813 394-6031  
Name of Person at ( Area Code ) Daytime Telephone Number

Enclosed is a check for the following amount:

<input checked="" type="checkbox"/> \$25.00 Filing Fee	<input type="checkbox"/> \$30.00 Filing Fee & Certificate of Status	<input type="checkbox"/> \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	<input type="checkbox"/> \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
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**MAILING ADDRESS:**  
Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**STREET/COURIER ADDRESS:**  
Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301



If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

**MGR = Manager**

**AMBR = Authorized Member**

**D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)**

✓ Add FEIN Number (47-3642311)

**E. Effective date, if other than the date of filing:** 3/24/2016 **(optional)**  
(If no effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (2)

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)  
**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of:  
(b) The 90th day after the record is filed.

Dated

Charles John

Typed or printed name of signee

THE MILITARY ORDER OF THE LOST BATTALION, FLORIDA

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**Filing Fee: \$25.00**