

L18000239274

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

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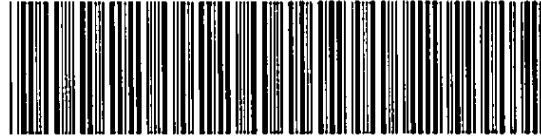
(Business Entity Name)

(Document Number)

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COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Digital Vulture, LLC name TO BE CHANGED

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:

JOSEPH WILLIAM BALL

Name of Person

FALLBACK LOGISTICS, LLC.

Firm/Company

2708 LIBERTY LANE

Address

JACKSONVILLE BEACH, FLORIDA 32250

City/State and Zip Code

JOSEPH.BALL@SHIPPREXP.COM

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

For further information concerning this matter, please call:

JOSPEH BALL

904 7161706
at ()

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

☐ \$25.00 Filing Fee

☐ \$30.00 Filing Fee &
Certificate of Status

☐ \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed)

☒ \$60.00 Filing Fee,
Certificate of Status &
Certified Copy
(additional copy is enclosed)

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

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

DIGITAL VULTURE, LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on 10/09/2018 and assigned
Florida document number L18000239274.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

FALLBACK LOGISTICS, LLC.

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

FALLBACK LOGISTICS, LLC.

2708 LIBERTY LANE

JACKSONVILLE BEACH, FLORIDA 32250

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

FALLBACK LOGISTICS, LLC.

2708 LIBERTY LANE

JACKSONVILLE BEACH, FLORIDA 32250

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

New Registered Office Address:

FALLBACK LOGISTICS, LLC. 2708 LIBERTY LANE JAX BCH, FL 32250

Enter Florida street address

JACKSONVILLE BEACH

Florida 32250

City

Zip Code

New Registered Agent's Signature, if changing Registered Agent:

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 relative 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 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

If Changing Registered Agent, Signature of New Registered Agent

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

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove
		_____	<input type="checkbox"/> Change
_____	_____	_____	<input type="checkbox"/> Add
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CLERK OF DISTRICT COURT

DEAN A. MOSELEY, CLERK

E. Effective date, if other than the date of filing: _____ (optional)

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.

Dated JOSEPH W. BALL 12/26/2018 JB

JOSEPH WILLIAM BALL

Page 3 of 3

Filing Fee: \$25.00