

18000019954

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

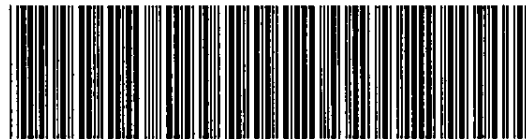
(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Spoke to Mathew Houston  
who gave permission to  
remove the title owner.

Office Use Only



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SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
18 FEB 16 PM 4:20

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FEB 16 2018



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

February 12, 2018

MATHEW HOUSTON  
112 GEORGE AVE  
NEW ELLENTON, SC 29809

SUBJECT: SWUMP LOCK RECORDS LLC  
Ref. Number: L18000019954

We have received your document for SWUMP LOCK RECORDS LLC and your check(s) totaling \$30.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

You must be specific with what you are correcting.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Jenna D Harris  
Regulatory Specialist II

Letter Number: 618A00002935

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Swump Lock Records LLC  
Name of Limited Liability Company

Dear Sir or Madam:

The enclosed Statement of Correction and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Mathew Houston  
Name of Person

112 George Ave  
Firm/Company  
Address

New Ellenton SC 29809  
City/State and Zip Code

breakbread39@gmail.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Mathew Houston at ( 786 ) 991-4687  
Name of Person Area Code Daytime Telephone Number

### STREET/COURIER ADDRESS:

Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, Florida 32301

### MAILING ADDRESS:

Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, Florida 32314

Enclosed is a check for the following amount:

- ☐ \$25 Filing Fee    ☒ \$30 Filing Fee & Certificate of Status    ☐ \$55 Filing Fee & Certified Copy    ☐ \$60 Filing Fee, Certificate of Status & Certified Copy

**STATEMENT OF CORRECTION  
FOR  
FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY**

Pursuant to section 605.0209, F.S., this document is being submitted to correct a previously filed document.

**FIRST:** The name of the limited liability company is: Swump Lock Records LLC

**SECOND:** The Florida Document number of the limited liability company is: L180000019954

**THIRD:** Document to be corrected is: Articles of Organization

**(CHECK THE APPROPRIATE BOX AND COMPLETE THE APPLICABLE STATEMENT)**

☒ Contains an incorrect statement. The incorrect statement, the reason the statement is incorrect, and the corrected statement are as follows:

Matthew Houston 651 NW 73rd St Miami FL  
33150 Should've been first as  
manager of company

**OR**

☐ Was defectively signed. The manner in which the document was defectively signed and the appropriate correction are as follows:

**OR**

☒ The electronic transmission of the record was defective.

Matthew Houston February 2, 2018  
Signature of Authorized Representative Date

Signature of new registered agent, if applicable : ( NOTE: if correcting the registered agent, the new registered agent must sign accepting the designation).

**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.*

\_\_\_\_\_  
Registered Agent's Signature

Filing Fee: \$25.00  
Certified Copy: \$30.00 (optional)

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SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
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