

P110000088490

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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PICK-UP

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WAIT

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MAIL

(Business Entity Name)

(Document Number)

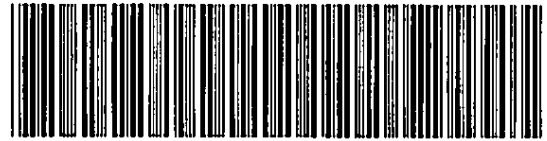
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SAILOR STREET, FLORIDA

NOV 28 2022

S. PRATHER

## COVER LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** About Computers  
Name of Corporation

**DOCUMENT NUMBER:** P11000088490

The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Samuel Walker

Name of Contact Person

Service Automotive Merchandising Incorporated/d.b.a. About Compute

Firm/Company

8820 N Himes Ave

Address

Tampa, FL, 33614

City/State and Zip Code

Justlife4u@gmail.com

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

For further information concerning this matter, please call:

Samuel Walker

at (727)

492-1602

Name of Contact Person

Area Code & Daytime Telephone Number

Enclosed is a \$35.00 check made payable to the Department of State.

**Mailing Address:**

Amendment Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Street Address:**

Amendment Section  
Division of Corporations  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

October 13, 2022

ABOUT COMPUTERS, INC.  
8820 N HIMES AVE  
TAMPA, FL 33614

SUBJECT: ABOUT COMPUTERS, INC.  
Ref. Number: P11000088490

We have received your document for ABOUT COMPUTERS, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must sign accepting the designation.

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) 245-6939.

Stacy Prather  
Regulatory Specialist III

Letter Number: 722A00023015

~~SEP 24 2022~~

OCT 24 2022

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

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of Florida in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: About Computers Inc
2. The principal office address: 8820 N Himes Ave  
Tampa, FL 33614
3. The mailing address (if different): \_\_\_\_\_
4. Date of incorporation/qualification: 10/07/2011 Document number: P11000088490
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)

Lon E. Holmberg- Resigned

7103 Mintwood Ct

Tampa, FL 33615

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

Samuel Walker

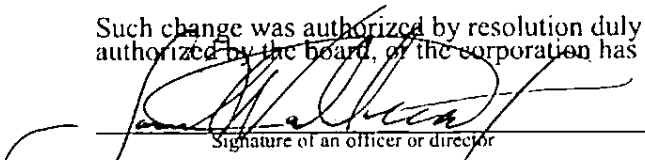
12810 US Highway 19 N

P.O. Box NOT acceptable

Clearwater, FL 33764

The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

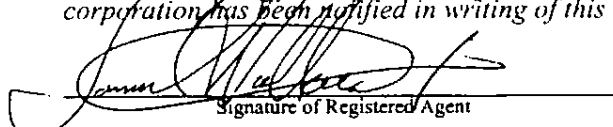
Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.

  
Signature of an officer or director

Samuel Walker

Printed or typed name and title

*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 obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.*

  
Signature of Registered Agent

10 Jul 2022

Date

If signing on behalf of an entity:

\_\_\_\_\_  
Typed or Printed Name

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

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE  
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

CR2E045 (04/13)

2022 OCT 24 AM 7:31  
TALLAHASSEE, FLORIDA