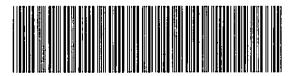
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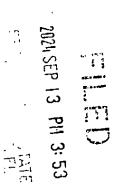
	(Requestor's Name)
	(Address)
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PICK-U	P WAIT MAIL
	(Business Entity Name)
	(Document Number)
Certified Copies	Certificates of Status
Special Instructions	s to Filing Officer:
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATI	BARBERSHOP BO	OOKCLUB, INC						
DOCUMENT NUMBER:	N21000007689							
The enclosed Articles of Art	nendment and fee are sub	mitted for filing.						
Please return all correspond	ence concerning this matt	ter to the following:						
BRODUS A. BROWN, JR	-							
		(Name of Contact	Person)				-	_
BARBERSHOP BOOK CI	LUB, INC							
		(Firm/ Compa	ny)					
2325 CENTRAL AVENUE	Ē					1	2024 SEP 1	
		(Address)					- <u>çç</u>	
SAINT PETERSBURG, FI	_ 33713						$\frac{1}{3}$	****
	<u> </u>	(City/ State and Zi	p Code)				_=	: {
BARBERSHOPBOOKCL	UB2020@GMAIL.COM					124	ဟ	الوييا
	E-mail address: (to be use	d for future annual r	eport noti	fication	n)	111	_ — C.) _	—
For further information con	cerning this matter, please	e call:						
BRODUS A. BROWN, JR	-		727 at		710-6427			
	(Name of Contact Person		(Area	Code)	(Daytime Tel	ephone N	umber)	
Enclosed is a check for the	following amount made p	payable to the Florid	a Departn	nent of	State:			
□ \$35 Filing Fee	☐ \$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fe Certified Copy (Additional copy enclosed)		Certif:	D Filing Fee icate of Status ied Copy tional Copy is osed)			
Mailing A	Address	<u>§</u>	treet Ad	dress				

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

Not

Articles of Amendment to Articles of Incorporation of

BARBERSHOP BOOK CLUB, INC

(Name of Corporation as currently filed with the Florida	Dept. of State)
N21000007689	
(Document Num	nber of Corporation (if known)
Pursuant to the provisions of section 617.1006, Florida Statuamendment(s) to its Articles of Incorporation:	utes, this Florida Not For Profit Corporation adopts the following
A. If amending name, enter the new name of the corpora	ation:
The Competitive Readers Coalition, Inc.	The new
name must be distinguishable and contain the word "corpor" (Company" or "Co," may not be used in the name.	ration" or "incorporated" or the abbreviation "Corp." or "Inc."
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRES</u> .	<u>s</u>)
	202
C. Enter new mailing address, if applicable:	70
(Mailing address MAY BE A POST OFFICE BOX)	<u> </u>
	P ::
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Die Rode von de von de	- <u></u>
D. If amending the registered agent and/or registered of new registered agent and/or the new registered office	
Name of New Registered Agent:	
intime of thew negistered Agent.	
	(Florida street address)
New Registered Office Address:	
	, Florida
	(City) (Zip Code)
New Registered Agent's Signature, if changing Registere	ed Agent:
I hereby accept the appointment as registered agent. I am j	familiar with and accept the obligations of the position.
	Signature of New Registered Agent, if changing

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and address of each Officer and/or Director being added:

(Attach additional sheets, if necessary)

Please note the officer/director title by the first letter of the office title:

P = President; V = Vice President; T = Treasurer; S = Secretary; D = Director; TR = Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.

Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is a change, Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example: X. Change X. Remove X. Add	PT John Do V Mike Jo SV Sally Sr	nes	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
l) Change Add	<u>D</u>	Leontae_Tukes	2325 Central Ave. St. Petersburg, Fl 33713
X Remove			
2) Change Add	D	Larry Lindsey	2325 Central Ave. St. Petersburg, Fl 33713
Remove 3)	<u>D</u>	Kimberly Brown-Williams	2325 Central Ave. St. Petersburg, Fl 33713
4) X Change Add	D	Trevor Mallory	2325 Central Ave. St. Petersburg, Fl 33713
Remove			
5) Change Add			
Remove			
6) Change Add			
Remove			
E. If amending or addir (attach additional shee		icles, enter change(s) here: (Be specific)	
			
			

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		 _
		
		 _
The date of each amendment(s) adoption:		ir a a a
date this document was signed.		, if other than the
04/19/2024		
Effective date if applicable:		
(no more than 90 days	after amendment file date)	
Note: If the date inserted in this block does not meet the applicated document's effective date on the Department of State's records.	ole statutory filing requirements, this date will not b	e listed as the
Adoption of Amendment(s) (CHECK ONE)		
The amendment(s) was/were adopted by the members and the was/were sufficient for approval.	ne number of votes cast for the amendment(s)	

Datad	04/19/2024
Dated	
Signature	. AMMIN AMMUN
_	(By the chairman or vice chairman of the board, president or other officer-if director
	have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)
	/ Jamari Graham
	(Typed or printed name of person signing)