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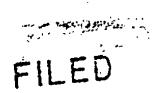
COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: JSF Ventures, Inc.				
DOCUMENT NUM	010000007701				
The enclosed Article	s of Amendment and fee are su	bmitted for filing.			
Please return all corre	espondence concerning this ma	tter to the following:			
	Jason Fagan				
	Name of Contact Person				
		Firm/ Company			
	1351 N. Courtenay Pkwy, St	iite N			
	Merritt Island, FL 32953	Address	·		
		City/ State and Zip Cod	e		
jťag	in@chesserfinancial.com				
	E-mail address: (to be us	sed for future annual report	notification)		
For further information	on concerning this matter, pleas	se call:			
Jason Fagan	_	at (³²¹	390-6849		
Name	of Contact Person	Area Co	de & Daytime Telephone Number		
Enclosed is a check f	or the following amount made	payable to the Florida Depa	artment of State:		
S35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)		
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Amend Divisio Clifton	Address Iment Section on of Corporations Building Executive Center Circle		

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of



JSF Ventures, Inc.

P1900007693	(Document Number of Corporation (if known SECRETARY OF STATE			
Pursuant to the provisions of section 607.1006. Florida Statutes, this Articles of Incorporation:	s Florida Profit Corporation adopts the following amendment(s)			
A. If amending name, enter the new name of the corporation:				
Fagan Financial Group, Inc.	The new			
name must be distinguishable and contain the word "corporati "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc.," or word "chartered." "professional association," or the abbreviation	on," "company," or "incorporated" or the abbreviation "Co". A professional corporation name must contain the			
3. Enter new principal office address, if applicable:	1351 N. Courtenay Pkwy			
Principal office address <u>MUST BE A STREET ADDRESS</u>)	Suite N			
	Merritt Island, FL 32953			
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)				
). If amending the registered agent and/or registered office address registered agent and/or the new registered office address				
Name of New Registered Agent				
tFlorida s	treet address)			
New Registered Office Address:	, Florida			
	(City) (Zip Code)			

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 officheld, 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	PT	John Doe	
\underline{X} Remove	<u>V</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	Address
1) Change	VP	Sarah A Fagan	1351 N. Courtenay Pkwy
X Add			Suite N
Remove			Merritt Island, FL 32953
2) X Change	Р	Jason Fagan	1351 N. Courtenay Pkwy
Add			Suite N
Remove			Merritt Island, FL 32953
3) Change			
Add			
Remove			
4) Change		_	
Add			
Remove			
51 Change			
Add			
Remove			
6) Change			
Add			
Remove			

	amending or adding additional Articles, enter change(s) here: tach additional sheets, if necessary). (Be specific)
_	
<u>If a</u>	an amendment provides for an exchange, reclassification, or cancellation of issued shares,
pr	rovisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)
	. <u></u> . <u></u> .

	7/10/2019	
The date of each amendment(s) late this document was signed.	adoption:	, if other than the
inte this abetiment was signed.		
Effective date <u>if applicable</u> :	<u> </u>	
	(no more than 90 days after amendment file date)	
Note: If the date inserted in thi document's effective date on the	s block does not meet the applicable statutory filing requirements, this date Department of State's records.	will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were a by the shareholders was/were	adopted by the shareholders. The number of votes cast for the amendment(s) sufficient for approval.	
	approved by the shareholders through voting groups. The following statement for each voting group entitled to vote separately on the amendment(s):	
"The number of votes ca	ist for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
☐ The amendment(s) was/were a action was not required.	dopted by the board of directors without shareholder action and shareholder	
The amendment(s) was/were a action was not required.	dopted by the incorporators without shareholder action and shareholder	
Dated		
Signature X 4		
(By a	director president or other officer - if directors or officers have not been	
	ared, by an incorporator – if in the hands of a receiver, trustee, or other court	
аррс	inted fiduciary by that fiduciary)	
	Jason Fagan	
	(Typed or printed name of person signing)	
	President	
	(Title of person signing)	