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COVER LETTER

TO:	Registration Section Division of Corporations
SURI	ECT: EBeauty Community Inc.
зова	Name of Corporation – must include suffix
Dear S	ir or Madam:
Affairs	closed "Application by Foreign Not for Profit Corporation for Authorization to Conduct its in Florida", "Certificate of Existence", or "Certificate of Status" and check are submitted to the above referenced not for profit corporation to conduct its affairs in Florida.
Please	return all correspondence concerning this matter to the following:
	Caren Callahan
†	Name of Person
	Firm/Company
	P O Box 15
	Address
	Ukiah CA 95482
	City/State and Zip Code
	caren@carencallahan.com
	E-mail address: (to be used for future annual report notification)
For fu	ther information concerning this matter, please call:
Caren	Callahan 707 463-0183 at ()
	Name of Person Area Code Daytime Telephone Number
	MAILING ADDRESS:STREET/COURIER ADDRESS:Registration SectionRegistration SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center CircleTallahassee, FL 32301
Enclos	ed is a check for the following amount:
57 (.00 Filing Fee \(\subseteq \precess{1}\\$78.75 Filing Fee & \(\text{Certificate of Status} \) \(\text{Certified Copy} \) \(\text{Certified Copy} \) \(\text{Certified Copy} \)

APPLICATION BY FOREIGN NOT FOR PROFIT CORPORATION FOR AUTHORIZATION TO CONDUCT ITS AFFAIRS IN FLORIDA

IN COMPLIANCE WITH SECTION 617.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN NOT FOR PROFIT CORPORATION FOR AUTHORIZATION TO CONDUCT ITS AFFAIRS IN THE STATE OF FLORIDA:

(Name of corporation: must include the word "INCORPORATED" or "CORPORATION" or words or abbreviations of I import in language as will clearly indicate that it is a corporation instead of a natural person or partnership if not so contain the name at present. "Company" or "Co." may not be used as a corporate suffix by a nonprofit corporation.) (If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida. (State or country under the law of which it is incorporated) (Sep. 16, 2011 (Date of Incorporation) (Date of duration, if other than perpetual) To be commenced after registration. (Date first conducted affairs in Florida if prior to registration. See sections 617.1501 & 617.1502, F.S. to determine penalty light of the conducted affairs of the conducted Dr., Chevy Chase MD 20185	da)
2. Maryland (State or country under the law of which it is incorporated) Sep. 16, 2011 (Date of Incorporation) To be commenced after registration. (Date first conducted affairs in Florida if prior to registration. See sections 617, 1501 & 617, 1502, F.S., to determine penalty lies.	
Maryland (State or country under the law of which it is incorporated) Sep. 16, 2011 (Date of Incorporation) To be commenced after registration. (Date first conducted affairs in Florida if prior to registration. See sections 617.1501 & 617.1502, F.S., to determine penalty lies.	
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(Date first conducted affairs in Florida if prior to registration. See sections 617.1501 & 617.1502, F.S, to determine penalty li	iability.)
(Date first conducted affairs in Florida if prior to registration. See sections 617.1501 & 617.1502, F.S., to determine penalty li	iability.)
c/o Tiffany Sanders, 5610 Kirkside Dr., Chevy Chase MD 20185	
(Principal office address)	
(Current mailing address, if different)	
(Current maning audiess, if unferent)	
Charitable and educational within the magning of IBC sec. 501(a)(3) for support of concernations	
Charitable and educational within the meaning of IRC sec. 501(c)(3) for support of cancer patients. (Purpose(s) of corporation authorized in home state or country to be carried out in the state of Florida)	
State of Fiornation authorized in nome state of country to be entired out in the state of Fiornation authorized in nome state of country to be entired out in the state of Fiornation authorized in nome state of country to be entired out in the state of Fiornation authorized in nome state of country to be entired out in the state of Fiornation authorized in nome state of country to be entired out in the state of Fiornation authorized in nome state of country to be entired out in the state of Fiornation authorized in nome state of country to be entired out in the state of Fiornation authorized in nome state of country to be entired out in the state of Fiornation authorized in nome state of country to be entired out in the state of Fiornation authorized in nome state of country to be entired out in the state of Fiornation authorized in nome state of country to be entired out in the state of Fiornation authorized in nome state of country to be entired out in the state of Fiornation authorized in nome state of country to be entired out in the state of Fiornation authorized in nome state of country to be entired out in the state of the st	A BENEVIOR
Name and <u>street address</u> of Florida registered agent: (P.O. Box <u>NOT</u> acceptable)	*
المسام المساولات	
Name: Carolyn Keller	O
Name: Office Address: 7815 Atlantic Way Miami Beach August 1815 Atlantic Way Miami Beach August 1815 Atlantic Way Miami Beach August 1815 Atlantic Way	
Office Address: 7815 Atlantic Way Miami Beach Florida 33140	
(City) (Zip Code)	
ž –	
0. Registered agent's acceptance:	the place
	ine piuce
aving been named as registered agent and to accept service of process for the above stated corporation at t esignated in this application, I hereby accept the appointment as registered agent and agree to act in this co	capacity.
laving been named as registered agent and to accept service of process for the above stated corporation at t esignated in this application, I hereby accept the appointment as registered agent and agree to act in this co orther agree to comply with the provisions of all statutes relative to the proper and complete performance o	capacity.
laving been named as registered agent and to accept service of process for the above stated corporation at t esignated in this application, I hereby accept the appointment as registered agent and agree to act in this co	capacity.
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the Department of State, by the Secretary of State or other official having custody of corporate records in the

jurisdiction under the law of which it is incorporated.

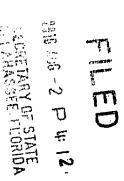
12. Names and addresses of officers and/or directors

A. DIR	ECTORS	
Chairmar	Carolyn Keller	
	7815 Atlantic Way	
-	Miami Beach FL 33140	
Vice Cha	irman:	
Address:	· ·	
Director:	Mark Keller	
•	7815 Atlantic Way	
_	Miami Beach FL 33140	
Director:	Tiffany Sanders	
	5610 Kirkside Dr.	and the front of the first of t
	Chevy Chase MD 20815	120 m
B. OF		200 N
President	Carolyn Keller	
	7815 Atlantic Way	H: I
	Miami Beach FL 33140	2 A
Vice Pres	sident:	
Address:		
Secretary	Tiffany Sanders	
	5610 Kirkside Dr., Chevy Chase MC 20815	
Treasure	Mark Keller	_
Address:	7815 Atlantic Way, Miami Beach FL 33140	
13	If necessary, you may attach an addendum to the application listing addition to the application list and application list application list and application list app	12 of the application)
• • • —	(Typed or printed name and canacity of person signing and	dication)

Application by Foreign Not for Profit Corporation for Authorization to Conduct Its Affairs in Florida

EBeauty Community Inc. Attachment to 12(A):

Name:	Title	Address
Caren Callahan	Director	PO Box 15 Ukiah, CA 95482
Sara Regis	Director	8906 Belmart Road Potomac, MD 20854
Eivind Bjerke	Director	6804 Whittier BLVD Bethesda, MD 20817
Louanne Roark	Director	1620 L Street NW, suite 1200 Washington,, DC 20036



STATE OF MARYLAND Department of Assessments and Taxation

I, HEIDI DUDDERAR OF THE STATE DEPARTMENT OF ASSESSMENTS AND TAXATION OF THE STATE OF MARYLAND, DO HEREBY CERTIFY THAT THE DEPARTMENT, BY LAWS OF THE STATE, IS THE CUSTODIAN OF THE RECORDS OF THIS STATE RELATING TO THE FORFEITURE OR SUSPENSION OF CORPORATIONS, OR THE RIGHTS OF CORPORATIONS TO TRANSACT BUSINESS IN THIS STATE, AND THAT I AM THE PROPER OFFICER TO EXECUTE THIS CERTIFICATE.

I FURTHER CERTIFY THAT EBEAUTY COMMUNITY INC., INCORPORATED SEPTEMBER 16, 2011, IS A CORPORATION DULY INCORPORATED AND EXISTING UNDER AND BY VIRTUE OF THE LAWS OF MARYLAND AND THE CORPORATION HAS FILED ALL ANNUAL REPORTS REQUIRED, HAS NO OUTSTANDING LATE FILING PENALTIES ON THOSE REPORTS, AND HAS A RESIDENT AGENT. THEREFORE, THE CORPORATION IS AT THE TIME OF THIS CERTIFICATE IN GOOD STANDING WITH THIS DEPARTMENT AND DULY AUTHORIZED TO EXERCISE ALL THE POWERS RECITED IN ITS CHARTER OR CERTIFICATE OF INCORPORATION, AND TO TRANSACT BUSINESS IN MARYLAND.

IN WITNESS WHEREOF, I HAVE HEREUNTO SUBSCRIBED MY SIGNATURE AND AFFIXED THE SEAL OF THE STATE DEPARTMENT OF ASSESSMENTS AND TAXATION OF MARYLAND AT BALTIMORE ON THIS JULY 30, 2016.

Heidi Dudderar

Associate Director



301 West Preston Street, Baltimore, Maryland 21201 Telephone Balto. Metro (410) 767-1340 / Outside Balto. Metro (888) 246-5941 MRS (Maryland Relay Service) (800) 735-2258 TT/Voice