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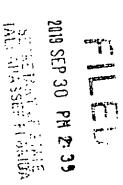
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COVER LETTER

10:	Division of Corporations					
SUBJ	IECT: DAOFENG & ANGELA FOUNDATION CORPORATION QUALIFICATION					
	Name of Corporation – must include suffix					
Dear S	Sir or Madam:					
Affair	nclosed "Application by Foreign Not for Profit Corporation for Authorization to Cos in Florida", "Certificate of Existence", or "Certificate of Status" and check are subser the above referenced not for profit corporation to conduct its affairs in Florida.					
Please	return all correspondence concerning this matter to the following:					
	DAOFENG HE					
	Name of Person					
	DAOFENG & ANGELA FOUNDATION CORPORATION					
	Firm/Company					
	9127 VIA BELLA NOTTE					
	Address .					
	ORLANDO, FL 32836					
	City/State and Zip Code					
	yangyangcui@hotmail.com	2019 SEP 30				
	E-mail address: (to be used for future annual report notification)	-) TO				
For fu	19					
DAO	FENG HE at () 620-6103	Paris 🕶				
	Name of Person Area Code Daytime Telephone N	umber				
	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 STREET/COURIER A Registration Section Division of Corporation Clifton Building 2661 Executive Center Tallahassee, FL 32301	ıs				
Please	Certificate of Status Certified Copy Cer	7.50 Filing Fee, tificate of Status &				

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:

(Date of Incorporation) (Date of duration, if other than perpet (Date first conducted affairs in Florida if prior to registration, See sections 617.1501 & 617.1502, F.S., to determine perpet 9127 VIA BELLA NOTTE, ORLANDO, FL 32836 (Principal office street address) (Current mailing address, if different)	e penalty	nalty liabil		illable in Florida, enter alternate corporate na	ame adopted for the purpose of transacting by	isiness in	Floric	la)	
(Date of Incorporation) (Date of Incorporation) (Date of duration, if other than perpet) (Date first conducted affairs in Florida if prior to registration. See sections 617.1501 & 617.1502, F.S., to determine p. 9127 VIA BELLA NOTTE, ORLANDO, FL 32836 (Principal office street address)	e penalty	nalty liabil	MARYLANI)	3 81-2371087				
(Date of Incorporation) (Date of duration, if other than perpet (Date first conducted affairs in Florida if prior to registration, See sections 617.1501 & 617.1502, F.S., to determine perpet 9127 VIA BELLA NOTTE, ORLANDO, FL 32836 (Principal office street address) (Current mailing address, if different)	e penalty	nalty liabil	(State or cou						
(Date first conducted affairs in Florida if prior to registration. See sections 617.1501 & 617.1502, F.S. to determine p. 9127 VIA BELLA NOTTE, ORLANDO, FL 32836 (Principal office street address) (Current mailing address, if different)	e penalty	nalty liabil	04/13/2016		5				
9127 VIA BELLA NOTTE, ORLANDO, FL 32836 (Principal office <u>street</u> address) (Current mailing address, if different)		2019 \$	(I	Date of Incorporation)	(Date of duration, if other than	ı perpetua	al)		
9127 VIA BELLA NOTTE, ORLANDO, FL 32836 (Principal office <u>street</u> address) (Current mailing address, if different)		2019 \$							
(Current mailing address, if different)	2013	<u> </u>	(Date first cond	ucted affairs in Florida if prior to registration.	See sections 617.1501 & 617.1502, F.S. to dete	rmine per	nalty li	abilii	
(Current mailing address, if different)	2019	<u> </u>	9127 VIA RE	LA NOTTE ORI ANDO EL 32836					
(Current mailing address, if different)	20	<u> </u>		(Principal of	office street address)				
	2019	<u> </u>							
	2019	<u> </u>							
FOR EDUCATIONAL AND CHARITABLE PURPOSES (Purpose(s) of corporation authorized in home state or country to be carried out in the state of Florida)	2019	<u> </u>		(Current main	ing address, if different)				
(Purpose(s) of corporation authorized in home state or country to be carried out in the state of Florida)	ے د	<u> </u>	DOD DDIIG.	WOLL		30	201		
(rurpose(s) of corporation authorized in home state of country to be carried out in the state of Florida)			POR EDUCA	HONAL AND CHARITABLE PURPOSES		·		£74	
\$ell		in a	(rurpose(s) or	corporation authorized in nome state or coun	my to be carried out in the state of Florida)	Sec.		ca.	
Name and street address of Florida registered agent: (P.O. Box NOT acceptable)		30	Name and str	eet address of Florida registered agent: (P.O. Box NOT acceptable)			3.1	
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Name: DAOFENG HE		E	Name:	DAOFENG HE				T pen	
	: •	C 3				_ , ;	(4)	÷.	
Office Address: 9127 VIA BELLA NOTTE ORLANDO , Florida 32836 (City) (Zip Code)	<u> </u>			ORLANDO	Florida 32836		9		
, Florida		₩ ₩ ₩							
9127 VIA BELLA NOTTE	: •			9127 VIA BELLA NOTTE				•.	
ORLANDO Florida 32836				ORLANDO	Planida 32836		•		
(Civ.)				0.1.2.1.2.0	. Piorida				

11. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to 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. For initial indexing purposes, list names, titles and addresses of the primary officers and/or directors [up to six (6) total]:

A. DIRECTOR				
□Chairman	Name: DAOFENG HE	□Chairman	Name:	
□Vice Chairman	Address: 9127 VIA BELLA NOTTE	□Vice Chairman	Address:	
□Director	ORLANDO, FL 32836	□Director		
■ President	-	□President		
□Vice President	·	□Vice President		
□Secretary	☐ Treasurer	□ Secretary		□Treasurer
□Other:	Other:	Other:		☐ Other:
□Chairman	Name: ANGELA CUI HE	□Chairman	Name.	
□Vice Chairman	Address: 9127 VIA BELLA NOTTE	□Vice Chairman		
□Director	ORLANDO, FL 32836	Director		
□President		□President		
■Vice President		□Vice President		
□Secretary	□Treasur e r	□ Secretary		□Treasurer
Other:	Other:	Other:		□ Other: 2
□Chairman	Name: JINPING JIN	□Chairman	Name:	
□Vice Chairman	Address: 932 HUNGERFORD DR	□Vice Chairman	Address:	
■Director	STE 11B	□Director		A STATE
□President	ROCKVILLE, MD 20850	□President		: (<u>a</u>
□Vice President		□Vice President		
□Secretary	□Treasurer	□Secretary		□Treasurer
□Other:	Other:	Other:		Other:
Non-indexed indiv	(Signature of Chairman, Vice Chairman, or any HE, PRESIDENT (Typed or printed name and capacity of	ur Florida Department officer listed in number	of State Annu-	al Report form.

STATE OF MARYLAND Department of Assessments and Taxation

I, MICHAEL L. HIGGS 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.

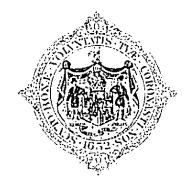
I FURTHER CERTIFY THAT DAOFENG & ANGELA FOUNDATION CORPORATION (D17197880), INCORPORATED APRIL 13, 2016. IS A CORPORATION DULY INCORPORATED AND EXISTING UNDER AND BY VIRTUE OF THE LAWS OF MARYLAND AND THE CORPORATION HAS FILED ALL

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 SEPTEMBER 19, 2019.

Michael L. Higgs

Director



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

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