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TALLAHASSEE, FLORIDA

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COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: Institute for the Study of Coherence and Emergence
Name of Corporation – must include suffix

Dear Sir or Madam:

The enclosed "Application by Foreign Not for Profit Corporation for Authorization to Conduct its Affairs in Florida", "Certificate of Existence", or "Certificate of Good Standing" and check are submitted to register the above referenced not for profit corporation to conduct its affairs in Florida.

Please return all correspondence concerning this matter to the following:

Aaron A Farmer

Name of Person

Farmer and Associates

Firm/Company

999 Vanderbilt Beach Rd Suite 503

Address

Naples FL 34108

City/State and Zip Code

afarmer@us-law.com

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

For further information concerning this matter, please call:

Heather Front

Name of Person

at (239) 262-2040

Area Code & Daytime Telephone Number

MAILING ADDRESS:

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

STREET/COURIER ADDRESS:

New Filing Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Enclosed is a check for the following amount:

- ☒ \$70.00 Filing Fee ☐ \$78.75 Filing Fee & Certificate of Status ☐ \$78.75 Filing Fee & Certified Copy ☐ \$87.50 Filing Fee, Certificate of Status & 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:

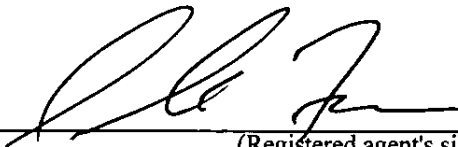
1. Institute for the Study of Coherence and Emergence Inc.
(Name of corporation: must include the word "INCORPORATED" or "CORPORATION" or words or abbreviations of like import in language as will clearly indicate that it is a corporation instead of a natural person or partnership if not so contained in the name at present. "Company" or "Co." may not be used as a corporate suffix by a nonprofit corporation.)
2. Massachusetts 3. 043482251
(State or country under the law of which it is incorporated) (FEI number, if applicable)
4. 7/28/1999 5. Perpetual
(Date of Incorporation) (Duration: Year corp. will cease to exist or "perpetual")
6. October 1, 2011
(Date first conducted affairs in Florida if prior to registration. See sections 617.1501 & 617.1502, F.S. to determine penalty liability.)
7. 2338 Immokalee Rd Naples FL 34110
(Principal office address)
2338 Immokalee Rd #292 Naples FL 34110
(Current mailing address)
8. Educational Research
(Purpose(s) of corporation authorized in home state or country to be carried out in the state of Florida)
9. Name and street address of Florida registered agent: (P.O. Box **NOT** acceptable)
Name: Farmer & Associates, PLLC.
Office Address: 999 Vanderbilt Beach Rd Suite 503
Naples, Florida 34108
(City) (Zip Code)

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10. Registered agent's acceptance:

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, 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 obligations of my position as registered agent.


(Registered agent's signature)

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. Names and addresses of officers and/or directors:

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A. DIRECTORS

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Chairman: Michael R. Lissack

Address: 2338 Immokalee Rd Naples FL 34110

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TALLAHASSEE, FLORIDA

Vice Chairman: _____

Address: _____

Director: Robert Turner

Address: 418 Bayside Avenue, Naples FL 34108

Director: Christine Sutherland

Address: 4005 GULF SHORE DR., UNIT 503, NAPLES, FL 34103

B. OFFICERS

President: Michael R. Lissack

Address: 2338 Immokalee Rd Naples FL 34110

Vice President: Michael R. Lissack

Address: 2338 Immokalee Rd Naples FL 34110


Secretary: Kenneth Lissack

Address: 14 Stratford Rd Marblehead MA 01945

Treasurer: Michael R. Lissack

Address: 2338 Immokalee Rd Naples FL 34110

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

13. 
(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

14. Michael R. Lissack, President
(Typed or printed name and capacity of person signing application)



William Francis Galvin
Secretary of the
Commonwealth

The Commonwealth of Massachusetts
Secretary of the Commonwealth
State House, Boston, Massachusetts 02133

Date: September 08, 2011

To Whom It May Concern :

I hereby certify that according to the records of this office,

**INSTITUTE FOR THE STUDY OF COHERENCE AND EMERGENCE,
INC.**

is a domestic corporation organized on **July 28, 1999**

I further certify that there are no proceedings presently pending under the Massachusetts General Laws Chapter 180 section 26 A, for revocation of the charter of said corporation; that the State Secretary has not received notice of dissolution of the corporation pursuant to Massachusetts General Laws, Chapter 180, Section 11, 11A, or 11B; that said corporation has filed all annual reports, and paid all fees with respect to such reports, and so far as appears of record said corporation has legal existence and is in good standing with this office.



In testimony of which,
I have hereunto affixed the
Great Seal of the Commonwealth
on the date first above written.

William Francis Galvin

Secretary of the Commonwealth

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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Certificate Number: 11094357170

Verify this Certificate at: <http://corp.sec.state.ma.us/corp/Certificates/Verify.asp>

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