

No 5000000891

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

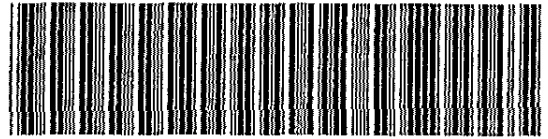
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

1/27/05
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TRANSMITTAL LETTER

Department of State
Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314

SUBJECT: INSTITUTE for Conflict Resolution, inc.
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed is an original and one(1) copy of the Articles of Incorporation and a check for :

\$70.00
Filing Fee

\$78.75
Filing Fee &
Certificate of
Status

\$78.75
Filing Fee
& Certified Copy

\$87.50
Filing Fee,
Certified Copy
& Certificate

ADDITIONAL COPY REQUIRED

FROM: SOLOMON ROTHSTEIN
Name (Printed or typed)

6329 COPPER LAKE COURT
Address

BOYNTON BEACH, FLORIDA 33437
City, State & Zip

561-752-8604
Daytime Telephone number

NOTE: Please provide the original and one copy of the articles.

ARTICLES OF INCORPORATION In Compliance with Chapter 617, F.S., (Not for Profit)

ARTICLE I NAME

The name of the corporation shall be: **The Institute for Conflict Resolution, Inc.**

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:
**6329 Copper Lake Court,
Boynton Beach, Florida 33437**

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

1. **As a charitable, educational, and religious organization to help facilitate peace and unity in the workplaces of America, between employees, employers and customers without respect of person or ability to pay.**
2. **To provide or facilitate religious services for the community according to their own faith tradition.**
3. **To train and equip organizations with the skills to resolve conflict in the workplace and facilitate reconciliation of human relationships.**
4. **To act in a consultant and meditation capacity for organizations requesting assistance to resolve conflict.**
5. **To ensure terminal patients of every faith tradition receive the opportunity to express their right to freedom of religious practices and traditions in a safe, legal, and satisfying manner.**
6. **To provide certification to Hospice care providers, along with continuing education, training, and accountability to standards of conduct related to a patient's faith preferences.**
7. **To provide ethical accountability and public endorsement for organizations providing ethical end of life care to patients of diverse faith**
8. **To advocate in an activist capacity for any patient whose civil, religious or human rights are being violated.**
9. **To increase awareness to the role of the human spirit and its relationship to the state of the physical body in decline.**
10. **To increase awareness concerning the role of communication between the human spirit and other spirits**
11. **To facilitate reconciliation of spiritual relationships**
12. **To promote research into the working of the human spirit as it remains in the human physical body**
13. **To help discover the purpose the physical body in its relationship to the human spirit's desire for life.**
14. **To increase awareness to the existential experiences the human spirit plays in the physical body**
15. **To increase awareness to the effects physical death of the body has on the human spirit**
16. **To increase awareness to the effects of euthanasia on the human spirit**
17. **To facilitate the spiritual power of personal choice to promote personal empowerment and enhance life.**
18. **To increase awareness to the relationship of the human spirit to God**
19. **To advocate for the physical and spiritual life of each person**
20. **To provide all available information and views to patients in order for them to make their own decision**
21. **To value, respect and protect physical and spiritual life in entrusted custodial care uncoerced to make life choices**

ARTICLE IV MANNER OF ELECTION

The manner in which the directors are elected or appointed:: **The directors are elected by a majority vote of the Governing Board**

ARTICLE V INITIAL DIRECTORS AND/OR OFFICERS List name(s), address(es) and specific title(s):

1. **President and CEO, Rabbi Dr. Solomon Rothstein
6329 Copper Lake Court, Boynton Beach, Florida, 33437**
2. **Vice President The Rev. Dr. Philip Kittle
P.O. Box 2421 Jupiter, Florida 33468**
3. **Treasurer: Gloria B. Layne
6329 Copper Lake Court, Boynton Beach, Florida, 33437**

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TALLAHASSEE, FLORIDA

ARTICLE VI INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

**Rabbi Dr. Solomon Rothstein
6329 Copper lake Court
Boynton Beach, Fl. 33437**

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

**Rabbi Dr. Solomon Rothstein
6329 Copper Lake Court
Boynton Beach, Florida 33437**

.....
Having been named as registered agent to accept service of process for the above stated corporation at the place in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity.

Solomon Rothstein
Signature/Registered Agent

1/20/05
Date

Solomon Rothstein
Signature/Incorporator

1/20/05
Date