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Date: April 14, 2025

Delivered Via: Electronic Mail

Attorney General James Uthmeier, Esq.
Office of Attorney General
State of Florida
PL-01, The Capitol
Tallahassee, FL 32399

Re: Request to Investigate and Prosecute COVID Patient Abuse & Hospital Homicide

Dear Attorney General Uthmeier,

Below is a petition setting forth your authority, as the Attorney General of Florida, to investigate and prosecute the COVID hospital homicide criminal campaign in the State of Florida, at the request of your constituents. This petition is specific to Florida law and specifically includes the identities and stories of seventy-five (75) Florida victims, representing thousands of victims across the state, as well as publicly available evidence that supports investigation and prosecution of the crimes identified below. An initial petition was filed in October 2023 with former Attorney General Ashley Moody, though our office received no substantive response since that time. In the two years since the initial petition, over 40 additional victims have come forward to be part of this petition, and there is more publicly available evidence demonstrating the criminal conduct of the Accused identified below. We know that justice and accountability for Covid misconduct is of importance to your office and Governor Ron DeSantis, so we resubmit the petition, including additional constituent petitioners. Similar petitions have also been submitted on behalf of their respective constituents to the Attorneys General and/or District Attorneys of Texas, Louisiana, Missouri, Oklahoma, Pennsylvania, and Arizona. At the time of this submission, two open criminal investigations are pending in two states, conducted by county prosecutors.

The names and information of the representative 75 victim petitioners are attached as **EXHIBIT A** hereto. Letters from the families of thirty-one (31) of these victims in Florida are attached to this petition as **EXHIBIT B**. Additionally, attached as **EXHIBIT C** hereto is an affidavit from a trauma and critical care surgeon who practiced in Washington State who is able to explain how the hospitals, at the behest and in coordination with federal officials, abused, trafficked, and killed their victims for financial gain. Some of the publicly available evidence of the financial gain is explained, with references, in the attached **EXHIBIT D** and **EXHIBIT E**. We have attached these exhibits to aid you in your investigation of the systematic and top-down criminal directives carried out in the hospitals within your jurisdiction.



Should you require additional evidence prior to or during your investigation, we are happy to provide any and all additional evidence we have obtained to support your efforts in obtaining justice for the victims of Florida. Many whistleblowers and experts have come forward to our office, willing to assist law enforcement in the investigation and prosecution of the crimes enumerated in this petition. The purpose of this petition, however, is to outline the facts and probable cause of criminal conduct of the Covid Criminal Enterprise including hospital administrations, and we ensured this petition remained succinct with limited evidence examples, for your convenience.

JURISDICTION AND AUTHORITY

As the elected Attorney General of the State of Florida, pursuant to Florida Statutes §16.56 and §16.01, the Attorney General may investigate and prosecute numerous criminal offenses. These crimes include murder, manslaughter, abuse, and racketeering. As shown below, the criminal acts alleged herein have occurred in two or more judicial circuits and are part of a related transaction or are connected with an organized criminal conspiracy affecting two or more judicial circuits.

Pursuant to Florida Statute §910.005, the Florida courts have criminal jurisdiction over anyone who commits, while inside or outside the state, or engages in conduct outside the state, that constitutes an attempt or conspiracy to commit an offense within the state, or that the result of the offense, such as death of a victim, occurs within the state.

Under state criminal law, the prosecution must prove each defendant(s) actions were deliberate and intended to cause harm or death. Unlike in a typical state criminal case, the Accused here acted with intent to cause the suffering and harm of victims largely through the successful coercion of, or direction to, third parties to carry out the desired harm.¹ Due to the nature of causation/culpability in this case, and the severity of the harm caused to thousands of Floridians, it is appropriate to evaluate alternative theories of causation & culpability such as the international principle of command/superior responsibility, which has been upheld in United States courts.

This theory of culpability requires that the individual setting forth the policy or coercing conduct of others should be held liable for the harm and deaths caused by individuals down the chain of command who are carrying out the policy and coercion. In international law, this principle is most often recognized in prosecutions for war crimes, such as the rape, murder, and torture of civilians by soldiers whose commanding officers are responsible for failing to stop the crimes they knew occurred and/or for encouraging the criminal behavior through their policies and training. *In Re Yamashita*, 327 U.S. 1 (1946). This same principle has been applied to civilians and civilian leadership; for example, the successful prosecution of the Nazi doctors who created and implemented the plans and experiments to torture, murder, and injure humans in the name of medical science. *United States v. Karl Brandt et al.* (the Doctors Trial), IV LRTWC 91-3 (1947).

Florida law is not opposed to the principles of causation in “command responsibility” or responsibility for another carrying out a directed/encouraged/facilitated/paid-for crime, see for example in RICO charges and under many civil claims. See Fl. Stat. §766.118(1)(c); Fl. Stat. §766.118(3)(c); Fl. Stat. §400.0237(3); Fl. Stat. §440.11; Fl. Stat. §322.09; Fl. Stat. §741.24; Fl. Stat. §877.23; Fl. Stat. §673.4051; Fl. Stat. §316.1577; and Fl. Stat. §895.03.

The Accused are liable for their crimes against their Floridian victims because they used their positions of authority to create, implement, and enforce harmful policies, using governmental

¹ See Fl. Stat. §§ 777.011, 777.04(2), (3).



power *ultra vires* to threaten withdrawal of licensing and funding of healthcare facilities and medical professionals if they gave effective medical care or refused to provide life-threatening medical procedures and medication to citizens of Florida. Further, the Accused ensured that each step of their fatal protocol was performed by, and in conjunction with, Floridian healthcare facilities and medical professionals. Florida victims were prevented from receiving alternative life-saving treatments, even when prescribed, and were/are forced to take experimental and lethal treatments including remdesivir and vaccines against their wishes, without informed consent. Floridian victims died as a direct result of the actions of the Accused.

The United States Supreme Court has commented on state criminal prosecution of federal actors. To successfully defeat a federal immunity defense, it must be shown that the federal actor was either not performing an authorized act, or while performing an authorized act, did more than what was necessary or proper for him/her to do. See *In re Neagle*, 135 U.S. 1 (1890); *Johnson v. Maryland*, 254 U.S. 51, 56-57 (1920).

Here, all of the Accused either acted beyond their authority or acted beyond what was necessary and proper while performing an authorized act and knowingly and intentionally caused suffering and death to victims in the State of Florida.² It was not necessary or proper for the Accused to:

- create SARS-CoV-2 through gain of function and hide that truth,
- create and impose mask mandates that they knew caused only harm and no benefit,
- impose/coerce/force medical products and treatment protocols that provide the Accused with financial gain and provide patients little – if any – clinical benefit (such as remdesivir) and without the victim's informed consent,
- to misuse media and to coerce/force the withholding of medicines (against patient's express wishes with informed consent) proven to be safe and effective,
- to isolate their victims from their loved ones and patient advocates knowing there was no benefit in making people die afraid and alone, etc. (see evidence cited below)

Even though the Accused tried to hide behind ill-conceived legalities to pretend that their murder, fraud, and abuse, were legal, acceptable, and un-punishable – it is illegal and unacceptable, and justice for their victims requires prosecution and punishment under the law.

THE ACCUSED

While the evidence indicates there are many more individuals involved in the COVID-19 Hospital Homicide Criminal Campaign, we have selected a few individuals we believe are a natural starting point of an investigation as their complicity and actions engaging in what appears to be criminal activity is readily shown by publicly available evidence. These individuals include, but are not limited to:

- **Anthony Fauci** – ex-Director, National Institute of Allergy and Infectious Diseases (NIAID)

² This is especially so as some of the Accused never actually took their proper oath of office, thus they had no authority under any law to act. See *infra* and Petition for Writ of Quo Warranto, <https://s3.documentcloud.org/documents/23789763/writ-of-quo-warranto-with-exhibits-apr-18-1.pdf>



- NOTE: Fauci's Acceptance of the Federal Pardon issued by former President Biden does not preclude the prosecution of his state crimes, in fact, his acceptance³ of the pardon is taken to be an admission of guilt. See *Burdick v. United States*, 236 U.S. 79 (1915) ("The latter [a presidential pardon] carries an imputation of guilt; acceptance a confession of it."). Nonetheless, the pardon has been voided by President Trump.
- **Cliff Lane**, Deputy Director, National Institute of Allergy and Infectious Diseases (NIAID)
- **Francis Collins**, ex-Director, National Institutes of Health (NIH)
- **Deborah Birx**, ex-White House COVID Response Coordinator & former Director of DOD HIV Research at Walter Reed Army Institute of Research
- **Rochelle Walensky**, ex-Director, Center for Disease Control and Prevention (CDC)
- **Stephen Hahn**, ex-Commissioner, Federal Drug Administration (FDA)
- **Janet Woodcock**, Principal Deputy Commissioner, Federal Drug Administration (FDA)
- **Peter Hotez**, Dean for the National School of Tropical Medicine & Professor of Pediatrics and Molecular Virology and Microbiology, Baylor College of Medicine & Co-Director of the Texas Children's Hospital Center for Vaccine Development in Houston
- **Robert Redfield**, ex-Director, Centers for Disease Control and Prevention (CDC)
- **Peter Daszak**, President, Eco-Health Alliance
- **Ralph Baric**, Professor, University of North Carolina
- **Rick Bright**, Former Director of the Biomedical Advanced Research and Development Authority (BARDA)
- The **Administrators of Hospital Systems and Facilities in Florida**, *inter alia*, the administrators at:
 - Advent Health Hospital (Alamonte Springs, North Pinellas, Celebration Hospital)
 - Sarasota Memorial Hospital
 - Malcom Randall VA Hospital (Gainesville)
 - Memorial Hospital West (Pembroke Pines)
 - The Villages Hospital
 - Ascension Network hospitals (Jacksonville, Pensacola)

APPLICABLE CRIMES⁴

Below are a few brief examples of how the COVID hospital homicide scheme and conspiracy are prosecutable under the Florida Criminal Code to obtain justice for the victims in the state. The applicable crimes include, among others:

- Fl. Stat §782.04, Second Degree Murder whilst Committing Acts of Terrorism and/or Aggravated Abuse of the Elderly and Disabled and/or Human Trafficking
 - The Victim was killed

³ See The Hill, "Fauci says he will accept preemptive pardon from Biden," January 20, 2025, <https://thehill.com/policy/healthcare/5095299-fauci-says-he-will-accept-preemptive-pardon-from-biden/>.

⁴ Depending on the specific Accused individual, either the identified charge or solicitation to commit the identified charges are applicable. See Fl. Stat. § 777.04, Criminal Solicitation.



- The Victim(s) was killed during the perpetration of, or the attempt to perpetrate a felony
 - A felony that is an act of terrorism or in furtherance of an act of terrorism;
 - A Trafficking Offense; or
 - Aggravated Abuse of an Elderly or Disabled Adult
- The Defendant was not the person who actually killed the victim, but did commit or did knowingly aid, abet, counsel, hire, or otherwise procured the commission of the alleged felony
- The Victim(s)' death was caused during and was a consequence of the commission of, or attempted commission of, the felony alleged; and
- The person who actually killed the Victim(s) was not involved in the commission or the attempt to commit the felony alleged.
- Fl. Stat. §782.04, First Degree Murder whilst Committing Acts of Terrorism and/or Aggravated Abuse of the Elderly and/or Human Trafficking
 - The Victim died
 - The Victim was killed by the Defendant, acting as the principal or accomplice
 - The Defendant effectuated the killing from a premeditated design to effect the death of any human being
 - The Defendant was engaged in the perpetration or, or attempt to perpetrate the following crimes when the killing occurred:
 - Aggravated abuse of an elderly person or disabled adult;
 - Human Trafficking; or
 - Felony that is an act of terrorism or is in furtherance of an act of terrorism
- Fl. Stat. §895.03, Florida RICO⁵
 - The Defendant had criminal intent,⁶
 - The Defendant received any proceeds, directly or indirectly, derived from a pattern of racketeering activity⁷
 - Racketeering activities include, but are not limited to (§895.02(8)(a)25 & 36):
 - homicide by terrorist acts,
 - homicide by aggravated abuse of the elderly,
 - human trafficking,
 - aggravated manslaughter of the elderly, disabled, or children,

⁵ Fl. Stat. §895.03(1), (3); Fl. Stat. §895.01 (8).

⁶ The Accused are culpable for either committing the prohibited racketeering activities or soliciting, coercing, or intimidating others to commit prohibited acts. Fl. Stat. §895.02(8).

⁷ To prove existence of “a pattern of racketeering activity” with criminal intent, under Fl. Stat. §895.03(3), the evidence must also show that the defendant’s participation in the enterprise occurred through at least two incidents of racketeering activity with the same or similar intent, result, victims, accomplices, or methods of commission or which were interrelated by distinguishing characteristics and were not isolated incidents. Fl. Stat. §895.03(3); Florida Draft Jury Instruction 26.7.



- abuse, or aggravated abuse of the elderly or disabled adults, etc.
- The proceeds were received directly or indirectly through the establishment or operation of any enterprise⁸; or
- the Defendant was employed by, or associated with, an enterprise to conduct or participate in the enterprise through a pattern of racketeering activity.
- Fl. Stat. §775.30, Terrorism
 - The Defendant commits a violent act or an act dangerous to human life or a computer offense in 815.06,
 - The act is intended to:
 - intimidate, injure, or coerce a civilian population;
 - influence the policy of a government by intimidation or coercion; or
 - affect the conduct of government through destruction of property, assassination, murder, kidnapping, or aircraft piracy
- Fl. Stat. §782.07(3), Aggravated Manslaughter of the Elderly, Disabled Adults, and Children
 - The Victim(s) died
 - The Victim is an elderly person or disabled adult or a child; and
 - The Defendant caused the death of the Victim(s) by culpable negligence under Fl. Stat. §825.102(3).
- Fl. Stat. §787.06, Human Trafficking
 - The Defendant knowingly, or in reckless disregard of the facts,
 - does or attempts to engage in human trafficking, or benefits from human trafficking
 - meaning: the victim(s) were transported, solicited, recruited, harbored, provided, enticed, maintained, purchased, patronized, procured, or obtained for the purpose of exploitation of the victim(s)
 - Using coercion⁹ for labor or services¹⁰ (including administering profitable health procedures) of an adult

⁸ An “enterprise” includes governmental entities and a group of individuals associated in fact, regardless of legal structure. Fl. Stat. §895.02(5). “An ‘enterprise’ is an ongoing organization, formal or informal, that functions both as a continuing unit and has a common purpose of engaging in a course of conduct.” *Gross v. State*, 765 So. 2D 39 (Fla. 2000); See Florida Draft Jury Instruction 26.7.

⁹ “Coercion” defined as using or threatening to use physical force against any person; Restraining, isolating, or confining or threatening to restrain, isolate, or confine any person without lawful authority and against her or his will; using lending or other credit methods to establish a debt by any person when labor or services are pledged as a security for the debt, if the value of the labor or services as reasonably assessed is not applied toward the liquidation of the debt, the length and nature of the labor or services are not respectively limited and defined; destroying, concealing, removing, confiscating, withholding, or possessing any actual or purported passport, visa, or other immigration document, or any other actual or purported government identification document, of any person; causing or threatening to cause financial harm to any person; enticing or luring any person by fraud or deceit; or providing a controlled substance as outlined in Schedule I or Schedule II of s. 893.03 to any person for the purpose of exploitation of that person. Fl. Stat. §787.06(2)(a).

¹⁰ “Services” means any act committed at the behest of, under the supervision of, or for the benefit of another. The term includes, but is not limited to, forced marriage, servitude, or the removal of organs. Fl. Stat. §787.06(2)(h).



- Fl. Stat. §825.102, Abuse¹¹ & Aggravated¹² Abuse of the Elderly and Disabled Adults
 - The Defendant intentionally inflicted a physical or psychological injury to the Victim, or
 - The Defendant actively encouraged any person to commit an act that results, or could reasonably be expected to result in physical or psychological injury to the Victim, or
 - The Defendant acted without lawful authority, to intentionally isolate or restrict access of the Victim to family members
 - The restriction of access must be reasonably expected to result in physical or psychological injury to the Victim, or
 - The restriction of access was done with the intent to promote, facilitate, conceal, or disguise some form of criminal activity involving the person or property of the Victim
 - The Victim is an elderly person¹³ or disabled adult
 - The additional elements that must be proven for aggravated abuse of the elderly or disabled adult under this statute are:
 - The Defendant acted knowingly or willfully
 - The Defendant causes the Victim great bodily harm, permanent disability, or permanent disfigurement by their abusive action(s)

FLORIDA VICTIMS AND REQUEST FOR INVESTIGATION

Just a few of the victims in your jurisdiction are included in this filing for your consideration of the evidence presented here, as these family members have come forward affirmatively to petition your investigation and prosecution of the crimes against their loved ones. See **EXHIBIT B** for copies of the letters written by some of these victim's surviving family members. It is of note that 56 of the 75 victims in Florida were over the age of 60.

Steve Koklas was admitted to the hospital two times for Covid-19 infection. The first admission the day after Christmas 2022, he was placed on a bi-pap machine at full air pressure, against the advice of his respiratory physician. Though he was sent home, his condition did not improve, prompting a return to the hospital where he was placed on Solu-Medrol, which causes psychosis and increased Steve's anxiety, even while he was denied ivermectin for Covid infection and the hospital pushed him to take remdesivir. The hospital also denied Steve nutrition until two days before his death, necessitating in the interim a blood transfusion, which his body rejected, since he was a liver transplant and required irradiated blood. He died the following day at the age of 85, sixteen days after his second admission to HCA Florida West Hospital.

Crisantemo Concepcion was 77 years old when he died from Covid-19 protocols at Orlando Health Central hospital on August 20, 2021. He was admitted only ten days prior at

¹¹ Fl. Stat. §825.102(1)(c), (d).

¹² Fl. Stat. §825.102(2)(c).

¹³ Fl. Stat. §825.101, "Elderly person" means a person 60 years of age or older who is suffering from the infirmities of aging as manifested by advanced age or organic brain damage, or other physical, mental, or emotional dysfunction, to the extent that the ability of the person to provide adequately for the person's own care or protection is impaired.



Orlando Health-Horizon West because he fainted, but he tested positive for Covid-19 at the hospital and was transferred to Central. He was immediately given remdesivir for five days – despite his being contra-indicated for the drug due to a kidney condition - and developed pneumonia, though he had shown no respiratory distress. Only four days after starting remdesivir, Crisantemo suffered a stroke, leaving him unable to speak. Eight days after admission, and one week after remdesivir, Crisantemo was placed in hospice care and died two days later of total kidney failure and sepsis after suffering a stroke and hypertension.

Your constituents, surviving family members of these victims, request that you use your designated authority to investigate the suspected crimes against your constituents, who suffered and died in the State of Florida, and prosecute culpable parties for criminal liability you discover for the creation and implementation the mandated COVID hospital protocols, along with the denial of informed consent, for which these parties received financial gain contrary to law.

CURRENTLY AVAILABLE EVIDENCE

The Accused have engaged, and continue to engage, without any legal authority, in a criminal enterprise for the purpose of mandating known harmful policies; incentivizing or coercing others to further these policies; and pharmaceutical development, testing, and implementation for monetary profit against victims without their informed consent,¹⁴ using governmental power *ultra vires* to ensure immunity from civil (and in some cases federal criminal) liability for harm, injury, and death resulting from the actions and operation of the Accused and their enterprise. In furtherance of the aims of the enterprise, specifically relating to the COVID-19 pandemic, the Accused have knowingly misrepresented dangers of pharmaceuticals, including “vaccines,” and “treatments,” such as masking¹⁵, social isolation,¹⁶ and remdesivir,¹⁷ that they have selected for the public in the COVID-19 pandemic, isolated and limited/prevented contact of Floridian patients from their patient advocates while in vulnerable

¹⁴ Anthony Fauci and Robert Redfield were personally thanked for their personal involvement in a September 2019 study on Ebola, which pulled remdesivir from the study early due to it being too dangerous to continue and causing an increase of over 50% mortality. NIAID, Ebola Treatment Research, last updated September 23, 2019, <https://www.niaid.nih.gov/diseases-conditions/ebola-treatment>; See Mulangu, et. al., “A Randomized, Controlled Trial of Ebola Virus Disease Therapeutics,” *The New England Journal of Medicine*, December 12, 2019, <https://www.nejm.org/doi/pdf/10.1056/NEJMoa1910993>. Then, in May 2020, Fauci was engaged in editing press releases about how remdesivir is safe for COVID, despite his knowledge that it increased patient mortality significantly (over 50%). FOIA Obtained Email between Anthony Fauci and Kathy Stover (NIH/NIAID), Courtney Billet (NIH/NIAID), Greg Folkers (NIH/NIAID), and Patricia Contrad (NIH/NIAID), May 5, 2020, at pg. 682-83, <https://www.documentcloud.org/documents/20793561-leopold-nih-foia-anthony-fauci-emails>.

¹⁵ Since 1919, cloth masks or face coverings have been known to not provide protection from airborne viruses. See Kellogg, “Influenza, A Study of Measures Adopted for the Control of the Epidemic,” *California State Board of Health*, January 1919, at 12-139, <https://babel.hathitrust.org/cgi/pt?id=uc1.31378008030317&seq=5>. When looking at the available studies, it is of note that the size of a SARS-CoV-2 particle is 100nm, or 0.1 microns while the pore size of filtration for a surgical mask is 80-500 microns - a minimum 800 times bigger than the size of a COVID particle – and N-95 mask pore size is 0.1-0.3 microns, assuming a perfect seal. The Accused knew that masking requirements exacerbated illness, caused increased breathing difficulty, caused significant harm to communication – especially for those with disabilities, and unnecessarily expedited the deaths of Pennsylvanians. See Advent Health Twitter post, September 2, 2022, <https://x.com/AdventHealth/status/1565799254416936960>. See also, USA Today, “COVID guidelines caused millions to suffer. Now Fauci admits ‘there was no science behind it,’ June 5, 2024, <https://www.usatoday.com/story/opinion/columnist/2024/06/05/fauci-hearing-covid-social-distancing-wrong/73962967007/> (Fauci explaining in testimony that social distancing, children in masks etc. were not based upon any scientific studies or reasoning).

¹⁶ See Note 14, *supra*.

¹⁷ See Note 15, *supra*.



states under hospital custody and control, and knowingly misrepresented the benefits of¹⁸ – and restricted access to – alternative, competing medicines, with scientific proof of efficacy and safety, with the foreseeable result that Floridian victims suffered immense psychological trauma and terror, illness, physical suffering, and painful death.

Whistleblowers have also come forward and explained that they knew, in hospitals, that by following the CDC protocols that were created, implemented, and made mandatory by the federal Accused and the hospitals, that the physician/nursing/pharmacy staff were knowingly and intentionally violating their oaths, were killing patients, and that the way the patients were isolated was a crime against humanity for the suffering and horror of what was done.¹⁹

Nurse Donna Lowery was terminated from Parrish Medical Center in Titusville, Florida after faithfully serving patients for thirty-one years, *merely* for advocating for the use of ivermectin – which provided measurable improvement to her patient - and praying for her patients. The hospital ordered the ivermectin stopped for the patient and instead gave her remdesivir, against patient consent. Even after Donna’s termination, the CEO and CNO of the hospital sought to revoke her nursing license because she advocated against known lethal remdesivir and for life-saving ivermectin.

The Accused *knew* that therapeutic treatments, including hydroxychloroquine, azithromycin, and ivermectin, prevented hospitalizations, reduced symptoms, and reduced deaths from COVID. The Accused actively suppressed²⁰ public knowledge of these effective treatments and deployed false information through news outlets and scientific journals²¹ and social media

¹⁸ See post by Ascension St. Vincent’s – Jacksonville, Twitter Post, March 23, 2021, and internal link to LinkedIn post by Estrellita Redmon (<https://www.linkedin.com/pulse/covid-19-vaccine-6-myths-facts-estrellita-redmond-md-mba/>), stating that natural immunity does not protect individuals from COVID infection – that those who did get COVID and recovered need to still be vaccinated, which is false and misleading & by falsely asserting that COVID-19 vaccines cannot cause infertility, & that the vaccines were appropriately tested and researched and are reliably safe and effective, & that “the benefits of vaccination ... far outweigh the risk of side effects from vaccination,” <https://x.com/Jaxhealth/status/1374377938917847040>.

¹⁹ See recording played by Ann Vandersteel from two Ascension Hospital employees, Twitter post May 16, 2023, <https://x.com/annvandersteel/status/1658452032359899136>. See also, Attorney Tom Renz discussion with Ascension Whistleblower who had nurses describe using remdesivir and morphine to “take care of business” and to “hasten death” of patients because of the COVID protocols, Rumble Video Interview, “Hospital Protocols to Kill” (see timestamp from 4:39 – 17:25), <https://rumble.com/v2e9hsw-tom-renz-hospital-protocols-to-kill-with-special-guest-adrienne-smith.html>. See recorded interview with Gail Macrae, recorded December 10, 2023, post on X by Children’s Health Defense, <https://x.com/i/broadcasts/1mnxepDOZEWJX>.

²⁰ See Scott Whitlock, Fox News, “Twitter Files part 9: Vast web of coordination between tech giant and CIA, State Department, other agencies,” December 2022, <https://www.foxnews.com/media/twitter-files-part-9-vast-web-coordination-between-tech-giant-cia-state-department>; Ryan Mills, National Review, “Twitter Files: Platform Suppressed Valid Information from Medical Experts about COVID-19,” December 2022, <https://www.nationalreview.com/news/twitter-files-platform-suppressed-valid-information-from-medical-experts-about-covid-19/>; See David R. Henderson, American Institute for Economic Research, “The FDA’s War Against the Truth on Ivermectin,” October 2021, <https://www.aier.org/article/the-fdas-war-against-the-truth-on-ivermectin/>.

²¹ See Studies condemning alternative COVID treatments that have been retracted due to lack of veracity in data and unsupportable conclusions: “RETRACTED: Hydroxychloroquine or chloroquine with or without a macrolide for treatment of COVID-19: a multinational registry analysis”, [https://www.thelancet.com/journals/lancet/article/PIIS0140-6736\(20\)31180-6/fulltext](https://www.thelancet.com/journals/lancet/article/PIIS0140-6736(20)31180-6/fulltext); “RETRACTED: Deaths induced by compassionate use of hydroxychloroquine during the first COVID-19 wave: An estimate”, <https://www.sciencedirect.com/science/article/pii/S075333222301853X>; See also “Covid-19: WHO halts hydroxychloroquine trial to review links with increased mortality risk”, <https://www.bmj.com/content/369/bmj.m2126>; See also Note 29, *infra.*; See also Note 54, *infra.*



platforms unlawfully through the power of the federal government.²² The Accused further utilized hospital systems' promoting false statements and coercive actions²³ to manipulate the civilian population and state and local governments to censor and punish those who provided truthful information regarding these treatments or sought to prescribe them to patients suffering COVID infection.²⁴ These actions by the Accused, and their other co-conspirators, were designed to prevent the ability of Floridians, and Americans generally, from obtaining informed consent²⁵ for their healthcare as well as from obtaining cheap,²⁶ available, safe, and effective COVID treatment, resulting in the suffering and death of thousands. It is well known in the federal agencies that the social distancing rules were not based on any scientific evidence or benefit;²⁷ that the COVID vaccines were pushed through approval without standard safety review and approval;²⁸ that the

²² See Rep. Thomas Massie, post on Twitter, February 19, 2025, <https://x.com/RepThomasMassie/status/189225923330065729>; See USA Today, August 28, 2024, "Republicans were right: Zuckerberg admits Biden administration censored your Facebook feed", <https://www.usatoday.com/story/opinion/columnist/2024/08/28/facebook-censorship-covid-biden-harris-social-media/74966270007/>.

²³ See Ascension Sacred Heart Twitter Post, of statement by Chief Clinical Officer Huson Gilberstadt, July 23, 2020, falsely stating that it is a "necessary act of kindness" for Floridians to wear a mask, <https://x.com/SHHPENS/status/1286396289874374656>; compare with Note 16, *supra*. See post by Ascension St. Vincent's – Jacksonville, Twitter Post, March 23, 2021, and internal link to LinkedIn post by Estrellita Redmon (<https://www.linkedin.com/pulse/covid-19-vaccine-6-myths-facts-estrellita-redmon-md-mba/>), falsely asserting that COVID-19 vaccines cannot cause infertility, & that the vaccines were appropriately tested and researched and are reliably safe and effective, & that "the benefits of vaccination ... far outweigh the risk of side effects from vaccination," <https://x.com/Jaxhealth/status/1374377938917847040> (compare to "The Pfizer Papers" edited by Naomi Wolf and Amy Kelly). Ascension St. Vincent's – Jacksonville, Twitter post, July 28, 2021, falsely stating that everyone in the community needs to get vaccinated to protect themselves and others, <https://x.com/Jaxhealth/status/1420388353241980930>. See Ascension St. Vincent's – Jacksonville, Twitter post, April 21, 2021, noting that they are joining other healthcare organizations in a "nationwide campaign" for COVID vaccination incorrectly implying that this is the way to achieve community immunity, <https://x.com/Jaxhealth/status/1384937087582064644>.

²⁴ See Letter from Mark Zuckerberg to Jim Jordan, Chairman of the House Judiciary Committee, August 26, 2024, <https://www.facebook.com/photo/?fbid=919665486871535&set=pcb.919665756871508>; See also **EXHIBIT C**, Affidavit of Dr. James Miller, wherein he explains that hospital leadership told physicians in leadership lies about COVID therapies immediately following meetings they had with federal agencies regarding COVID resources available to the hospital.

²⁵ The United States Supreme Court has declared, "Every human being of adult years and sound mind has a right to determine what shall be done with his own body; and a surgeon who performs an operation without his patient's consent commits an assault, for which he is liable in damages." *Cruzan v. Director, Mo. Dept. of Health*, 497 US 261, 269 (1990) (citing *Schloendorff v. Society of New York Hospital*, 211 N. Y. 125, 129-130, 105 N. E. 92, 93 (1914)). The Supreme Court further explained that the doctrine of informed consent also requires that patients have a right to refuse treatment, and that the injection of medication into a non-consenting person's body represents a substantial interference with that person's liberty. *Id* at 270, 278-79.

²⁶ See **EXHIBIT E**, pg. 7-8, outlining prices of available COVID treatments. For example: ivermectin = \$1, hydroxychloroquine = \$1, fluvoxamine = \$4, paxlovid = \$529, remdesivir = \$3,120 (per treatment).

²⁷ Testimony of Anthony Fauci to the COVID Select Subcommittee, "COVID Select Subcommittee Releases Dr. Fauci's Transcript, Highlights Key Takeaways in New Memo," May 31, 2024, <https://oversight.house.gov/release/covid-select-subcommittee-releases-dr-faucis-transcript-highlights-key-takeaways-in-new-memo/>.

²⁸ See Note 30, *infra*.; House of Representatives Judiciary Committee, "NEW REPORT: Biden Administration Pressured FDA and Ignored Risks During Initial COVID Vaccine Phase", June 24, 2024, https://judiciary.house.gov/media/press-releases/new-report-biden-administration-pressured-fda-and-ignored-risks-during-initial?utm_source=substack&utm_medium=email; See video recordings and signed affidavits by Pfizer Whistle Blower Justin Leslie – wherein seniors at Pfizer explained that the vaccines for COVID were about making money and were not safe or effective, <https://justintegrity.net/>.



vaccines cause harm and Accused intentionally denied investigation into those harms; and that vaccine/masking mandates and COVID countermeasures were predominantly in force to make the Accused money.²⁹

Fauci and Lane communicated in emails, even in February of 2020,³⁰ with various individuals, and even included in the remdesivir EUA,³¹ that hydroxychloroquine/chloroquine was used as successful early treatment for people infected with COVID-19.³² There was also a definitive study in 2005, primarily by CDC scientists, who found that pre-treatment of chloroquine/hydroxychloroquine prevents infection by SARS-CoV & that post-infection treatment significantly reduces the spread of infection and decreased the viral load and its effects.³³ Fauci was also informed of the effectiveness and safety of hydroxychloroquine many times by Peter Navarro and his team, although Fauci refused to accept or read the studies and data and refused to acknowledge or discuss the clear scientific evidence with them.³⁴ Rick Bright has also explained that he, at the direction of Janet Woodcock, undermined the ability of doctors to be provided hydroxychloroquine for early treatment and instituted a process that led to hydroxychloroquine being banned and unavailable to the public for COVID treatment completely.³⁵

²⁹ See post of undercover journalism video recording of NIH Chief of Health Data Standards Branch U.S. National Library of Medicine Raja Cholan, by James O’Keefe, posted on X (Twitter) on November 25, 2024, <https://x.com/JamesOKeefeIII/status/1861189891985678696>.

³⁰ FOIA Obtained Emails between Anthony Fauci and Hilary Marston, Dr. Philip Gatti (FDA Pharmacologist), Jonathan F. King, Cristina Cassetti (NIAID/NIH), Robert Redfield (CDC), Michael Pence (Vice President), Alex Azar (HHS), Dr. Paul Stanton, and Dr. Karyl Stanton, February 22, 2020; February 24, 2020; February 29, 2020, at pg. 153-155, 454-456, 515, <https://www.documentcloud.org/documents/20793561-leopold-nih-foia-anthony-fauci-emails>.

³¹ See EUA Application, at 5, https://www.accessdata.fda.gov/drugsatfda_docs/nda/2020/EUA%20Review%20Remdesivir_050120.pdf. Further, the “vaccines” are not permissible for an EUA under the statute at all because they are, if anything, a preventative measure rather than something to “diagnose, monitor, or treat” a disease, see 21 U.S.C. §360bbb(a)-(b); § 360bbb-0a(a)(1); and § 360bbb-3(a).

³² FOIA Obtained Emails between Cliff Lane and Maria VanKerkhove (WHO), February 21, 2020, pg. 172-173, 278-279, <https://www.judicialwatch.org/wp-content/uploads/2021/03/DCNF-v-HHS-Nov-2020-00149.pdf>; See Emergency Use Authorization for Remdesivir Center for Drug Evaluation and Research Review, pg. 5, https://www.accessdata.fda.gov/drugsatfda_docs/nda/2020/EUA%20Review%20Remdesivir_050120.pdf; FOIA Obtained Emails between Anthony Fauci (NIH/NIAID), Robert Redfield (CDC), Philip Gatti (FDA), Andrea Lerner (NIH/NIAID), Hilary Marston (NIH/NIAID), and Cristina Cassetti (NIH/NIAID), pg. 153-155, 454-56, 823-24, 1225-1226, 2018, 2025, 2078, <https://s3.documentcloud.org/documents/20793561/leopold-nih-foia-anthony-fauci-emails.pdf>.

³³ Vincent, *et al.*, “Chloroquine is a potent inhibitor of SARS coronavirus infection and spread,” *Virology Journal*, 22 August 2005, at 1-2, <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC1232869/pdf/1743-422X-2-69.pdf>.

³⁴ Dr. Steven Hatfill, The Hatfill Papers, “Single Point Failure II: The Role of Dr. Anthony Fauci in the Destruction of the National Pandemic Plan,” May 25, 2021, [https://img1.wsimg.com/blobby/go/7d181a8e-ee37-425a-a2b6-8674d27bacea/downloads/DSH%20-%20Single%20Point%20Failure%20II%20--%20\(05-25-2021\)%5B.pdf?ver=1726829547725](https://img1.wsimg.com/blobby/go/7d181a8e-ee37-425a-a2b6-8674d27bacea/downloads/DSH%20-%20Single%20Point%20Failure%20II%20--%20(05-25-2021)%5B.pdf?ver=1726829547725).

³⁵ See Whistleblower Complaint, Rick Bright, filed May 5, 2020, pg. 43-44, https://d3i6fh83elv35t.cloudfront.net/static/2020/05/R.-Bright-OSC-Complaint_Redacted.pdf. Note: HCQ was directed to be instituted as an IND protocol, meaning an Investigational New Drug wherein doctors are provided information about the drug and given special authority to prescribe it for an off label use for COVID – but, by instead implementing it as an EUA, and then shortly thereafter revoking its EUA status, the Accused were able to prevent HCQ’s use for COVID and secure their ability to have their newly developed, and highly profitable, “treatments” for COVID be the only approved “treatments”. See also *infra*, note 69.



Similarly, studies showing that ivermectin is safe, effective, and cheap are overwhelming – for example, in January 2022, a Brazilian study was performed on the use of ivermectin and its impact on hospitalizations and death, finding that appropriate use of ivermectin resulted in a 70% reduction in the mortality rate and a 67% reduction in hospitalization;³⁶ there were also studies done in 2020 and 2021 that showed significant reduction in hospitalizations or deaths of individuals who took ivermectin, and the Accused knew of these beneficial results.³⁷ However, the federal Accused suppressed these studies and engaged in misinformation campaigns with media and news, and the Accused have recently been forced to concede and remove from media their misleading statements about ivermectin being for horses or cows, not people.³⁸

Remdesivir was developed by Gilead Sciences, in conjunction with the U.S. CDC and the US Army Medical Research Institute of Infectious Diseases (USAMRIID) back in 2009, as well as further development and application exploration through collaborative research with individuals such as Ralph Baric beginning back in 2013/2014.³⁹ The Accused had knowledge that remdesivir did not reduce mortality (in fact it inflicts a greater than 50% mortality on its victims)⁴⁰, need for ventilation, or hospitalization for COVID-19, as noted in a December 2020 study by the

³⁶ Kerr, *et al.*, “Ivermectin Prophylaxis Used for COVID-19: A Citywide, Prospective, Observational Study of 223,128 Subjects Using Propensity Score Matching,” *Cureus*, January 2022, <https://pubmed.ncbi.nlm.nih.gov/35070575>.

³⁷ Morgenstern, *et al.*, “Ivermectin as a SARS-CoV-2 Pre-Exposure Prophylaxis Method in Healthcare Workers: A Propensity Score-Matched Retrospective Cohort Study,” *Cureus*, August 2021, <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC8405705/>; Biber, *et al.*, “Favorable Outcome on Viral Load and Culture Viability Using Ivermectin in Early Treatment of non-hospitalized Patients with Mild COVID-19 – A Double-blind, randomized placebo-controlled trial,” *medRxiv*, (now published in *International Journal of Infectious Diseases*), May 2021, <https://www.medrxiv.org/content/10.1101/2021.05.31.21258081v1>; Morgenstern, *et al.*, “The Use of Compassionate Ivermectin in the Management of Symptomatic Outpatients and Hospitalized Patients with Clinical Diagnosis of Covid-19 at the Centro Medico Bournigal and at the Centro Medico Punta Cana, Grupo Rescue, Dominican Republic, from May 1 to August 10, 2020,” *Journal of Clinical Trials*, November 2020, <https://www.longdom.org/open-access/the-use-of-compassionate-ivermectin-in-the-management-of-symptomatic-outpatients-and-hospitalized-patients-with-clinical.pdf>; Krolewiecki, *et al.*, “Antiviral Effect of high-dose ivermectin in adults with COVID-19: A proof-of-concept randomized trial,” *eClinicalMedicine*, July 2021, <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC8225706/>; Kory, *et al.*, “Review of the Emerging Evidence Demonstrating the Efficacy of Ivermectin in the Prophylaxis and Treatment of COVID-19,” *American Journal of Therapeutics*, May-June 2021, <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC8088823/>; Caly, *et al.*, “The FDA-approved Drug Ivermectin Inhibits the Replication of SARS-CoV-2 in vitro,” *Antiviral Research*, June 2020, <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC7129059/>; Bryant, *et al.*, “Ivermectin for Prevention and Treatment of COVID-19 Infection: A Systematic Review, Meta-analysis, and Trial Sequential Analysis to Inform Clinical Guidelines,” *American Journal of Therapeutics*, July-August 2021, <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC8248252/>.

³⁸ See *Newsweek*, March 22, 2024, “FDA Settles Lawsuit over Ivermectin Social Media Posts”, <https://www.newsweek.com/fda-settles-lawsuit-over-ivermectin-social-media-posts-1882562>.

³⁹ See ACS Central Science, “Remdesivir: A Review of Its Discovery and Development Leading to Emergency Use Authorization for Treatment of COVID-19,” May 4, 2020, <https://pmc.ncbi.nlm.nih.gov/articles/PMC7202249/>; UNC Gillings School of Global Public Health, “Remdesivir, developed through a UNC-Chapel Hill partnership, proves effective against COVID-19 in NIAID human clinical trials,” April 29, 2020, <https://sph.unc.edu/sph-news/remdesivir-developed-at-unc-chapel-hill-proves-effective-against-covid-19-in-niaid-human-clinical-trials/>; See also US Government Accountability Office – Report to Congressional Addressees, “Biomedical Research: Information on Federal Contributions to Remdesivir,” March 2021, <https://www.gao.gov/assets/gao-21-272.pdf>; Gilead Sciences, “Development of Remdesivir,” 2020, <https://www.wsha.org/wp-content/uploads/RDV-development-fact-sheet-Final.pdf>.

⁴⁰ See *Supra* Note 15.



World Health Organization.⁴¹ Further, studies showed that remdesivir was associated with longer hospital stays, and not with improvement of survival.⁴² There were other U.S. studies that also indicated that remdesivir did not, and would not, help Floridians reduce mortality, hospitalization, symptoms, or ventilation needs.⁴³ The NIAID-funded study cited by the Accused to promote use of remdesivir and obtain the EUA, showed only that its use could potentially reduce hospital stays by a few days – not that it reduced mortality, hospital admissions, or symptoms.⁴⁴

On or about September 13, 2021, just after the BLA grant for Pfizer-BioIntech's Comirnaty COVID-19 vaccines, which occurred in August 2021, "Project Salus"⁴⁵ briefing informed CDC officials that natural immunity was very effective in reducing hospitalization; whereas hospitalizations relating to COVID-19 infections were predominantly among COVID-19 vaccinated individuals.⁴⁶ Additionally, the CEO of Moderna recently admitted that they developed their COVID-19 vaccine before the COVID pandemic,⁴⁷ indicating that the lab-creation⁴⁸ of COVID and the plan for the use of vaccines for profit resulting from it was an intentional scheme and part of the criminal enterprise of the Accused.

⁴¹ See WHO Solidarity Trial Consortium, Pan *et al.*, "Repurposed Antiviral Drugs for COVID-19 – Interim WHO Solidarity Trial Results," *New England Journal of Medicine*, December 2, 2020, <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC7727327/>.

⁴² Ohl, *et al.*, "Association of Remdesivir Treatment With Survival and Length of Hospital Stay Among US Veterans Hospitalized with COVID-19," *JAMA Network Open*, July 2021, <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC8283561/>.

⁴³ See, e.g., Yan, *et al.*, "Why Remdesivir Failed: Preclinical Assumptions Overestimate the Clinical Efficacy of Remdesivir for COVID-19 and Ebola," *Antimicrobial Agents Chemotherapy*, September 17, 2021, <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC8448091/>.

⁴⁴ Beigel, *et al.*, "Remdesivir for the Treatment of Covid-19 – Final Report," November 2020 (preliminary version of article published May 22, 2020), *New England Journal of Medicine*, <https://www.nejm.org/doi/full/10.1056/NEJMoa2007764>.

⁴⁵ It is of note that in the FOIA documents it shows that Project Salus was an operation between the CDC, DOD, Humetrix, the Department of Defense Joint Artificial Intelligence Center (JAIC), and was then shared with at least the FDA. See FOIA Obtained Email from Bettina Experton (Humetrix) with Marion Gruber (FDA), Philip Krause (FDA), Peter Marks (FDA), Janet Woodcock (FDA), and Julia Tierney (FDA), September 15-16, 2021, at pg. 1-2, https://icandecide.org/wp-content/uploads/2023/05/2022-07-29-Production_IR0669B_FDA-83-pages.pdf#page=3.

⁴⁶ See FOIA obtained documents, https://icandecide.org/wp-content/uploads/2023/05/2022-07-29-Production_IR0669B_FDA-83-pages.pdf#page=3.

⁴⁷ See Statement of Stephane Barcel, CEO of Moderna, in 2023 noting that in January 2020 he had already had his company make thousands of vaccines for the coming COVID pandemic, <https://x.com/healthbyjames/status/1615891388264058881>; See also Statement of Stephane Barcel, CEO of Moderna, in 2020 noting that a pandemic is coming and that they already have 100,000 doses for 2019 and that he told his staff that they needed to make a billion doses of their vaccine for next year because of the coming pandemic, <https://x.com/BGatesIsaPyscho/status/1885718286299521416>.

⁴⁸ See House Committee on Oversight, "BREAKING: HHS Formally Debars EcoHealth Alliance, Dr. Peter Daszak After COVID Select Reveals Pandemic-Era Wrongdoing," January 17, 2025, <https://oversight.house.gov/release/breaking-hhs-formally-debars-ecohealth-alliance-dr-peter-daszak-after-covid-select-reveals-pandemic-era-wrongdoing/>; See Rep. Guy Reschenthaler, May 14, 2021, "Reschenthaler Uncovers \$1.1 Million in Taxpayer Funding Sent to the Wuhan Institute of Virology", <https://reschenthaler.house.gov/media/press-releases/reschenthaler-uncovers-11-million-taxpayer-funding-sent-wuhan-institute>; See also Elon Musk post on Twitter, February 2, 2025 – identifying over \$50 million dollars of USAID funding used to do gain of function research to create SARS-CoV-2, <https://x.com/elonmusk/status/1886129005759262964>; See also Statements by Robert Redfield, and others, explaining that Redfield believed that SARS-CoV-2 was created in America by Ralph Baric and was subsequently released in Wuhan China through lack of safety protocols and violations of supervision agreements, The Carolina



Dr. Deborah Birx has stated that from the outset of the pandemic, she knew that the vaccines “would not protect against infection,”⁴⁹ and further testified before Congress that the federal government knew in December of 2020, that the vaccines would not provide better protection than natural immunity. She testified that **it was not a true statement that being vaccinated may prevent transmission of COVID-19, and that they never had any data to support the assertion that the vaccines would protect against asymptomatic infection.**⁵⁰ Yet she and other federal actors⁵¹ deceived, unethically incentivized, and coerced federal agencies, healthcare facilities,⁵² healthcare providers, and civilians to take or administer vaccines, such that Floridians lost their jobs, their health, and/or their lives. For example, Rochelle Walensky then acting CDC Director falsely stated that COVID was “a pandemic of the unvaccinated” and that “if you are fully vaccinated, you are protected against severe Covid, hospitalization, and death.”⁵³ It must also be further investigated how the Electronic Health Record (EHR) companies/databases colluded/conspired with the federal agencies and hospital systems/administrators to coerce and pressure the hospital staff, nurses, and specifically the doctors to heavily pressure any individual listed in their hospital system as being “unvaccinated” for COVID-19 through their weekly meetings and updates of mandatory “guidelines”⁵⁴ and EHR forced functions, including having flashing headers at the top or bottom of each patient’s chart⁵⁵ so that every nurse and doctor would continuously pressure the victims – which better enabled the discrimination and mistreatment of “unvaccinated” patients, as described in the victim’s families letters in **EXHIBIT B**. It is also important to note, that nurses and doctors have come forward and explained that the way the EHR companies set up their systems, that even if a patient was “vaccinated” for COVID-19, they could not correct their system and when those patients died of COVID, they were improperly listed as “unvaccinated” deaths which resulted in providing financial benefit to the hospitals and hospital administrators, as well as providing false data that was used by the hospitals, federal agencies,

Journal, “Former CDC Director Claims that COVID-19 Emanated from UNC-Chapel Hill,” November 19, 2024, <https://www.carolinajournal.com/former-cdc-director-claims-that-covid-19-emanated-from-unc-chapel-hill/>.

⁴⁹ Deborah Birx, Fox News Interview, July 22, 2022, <https://www.foxnews.com/video/6309899975112>.

⁵⁰ Deborah Birx, Testimony before Federal Congress, June 23, 2022, at: 2:47-3:02, 3:32-3:55, 4:47-4:52, <https://www.c-span.org/video/?c5021092/dr-birx-knew-natural-covid-19-reinfections-early-december-2020>.

⁵¹ See CNN interview with Rochelle Walensky, CDC, statement August 6, 2021, (“Fully vaccinated people who get a Covid-19 breakthrough infection can transmit the virus”), <https://www.cnn.com/2021/08/05/health/us-coronavirus-thursday/index.html>.

⁵² See Advent Health twitter post, February 2, 2022, misleading by stating that the COVID-19 vaccines have been tested for pediatric safety and that there were no concerns – which is not the case, <https://x.com/AdventHealth/status/1488947280128446474>. See Advent Health twitter post, January 3, 2022, misleading by stating that COVID-19 vaccination protects you more than natural immunity does, <https://x.com/AdventHealth/status/147811172746436609>. See Advent Health twitter post, November 19, 2021, <https://x.com/AdventHealth/status/1461726006612537345>.

⁵³ Rochelle Walensky, CNN, “COVID-19 ‘is becoming a pandemic of the unvaccinated,’ CDC director says,” July 20, 2021, <https://www.cnn.com/2021/07/16/health/us-coronavirus-friday/index.html>. Compare, Walensky’s later statements that there is no data on vaccinated individuals, See post on X of video of Walensky statements by Clarendine, June 14, 2023, <https://x.com/WarClandestine/status/1669002086170652672>.

⁵⁴ Healthcare IT News, “How top EHR vendors are prepping their systems for COVID-19 vaccines,” December 21, 2020, <https://www.healthcareitnews.com/news/how-top-ehr-vendors-are-prepping-their-systems-covid-19-vaccines>.

⁵⁵ EPIC Share, “Talking It Out: Physicians Lead the Conversation to Reduce COVID-19 Vaccine Hesitancy,” February 28, 2022, “...vaccination statuses appear right in the patient’s chart, making it easy for physicians to see at a glance whether there are opportunities to talk to the patient about the COVID-19 vaccine.” - <https://www.epicshare.org/share-and-learn/talking-it-out-physicians-lead-the-conversation-to-reduce-covid-19-vaccine-hesitancy>.



and media to falsely inflate the reports of unvaccinated deaths (whilst falsely deflating the reports of vaccinated deaths) to intimidate, influence and coerce the population and government officials with knowingly false information.⁵⁶ The Accused used their false representations of the COVID vaccines safety and efficacy to coerce and obtain EUAs for COVID “vaccines” by fraud and thereby preclude the use of proven safe and effective, but cheap, medications. By doing so, the Accused not only *knowingly* caused harm to their victims,⁵⁷ but also ensured that *they received significant financial payouts as a result*.

A CMS press release states, “the Agency will not hesitate to use its full enforcement authority... unvaccinated staff pose both a direct and indirect threat to the very patients they serve...”⁵⁸ The Accused knew that this was a false statement, yet they still coerced and manipulated the understanding of the civilian population and weaponized government policy to the harm of Floridians. Moreover, the Accused engaged in this fraudulent misrepresentation in order to commit criminal acts entirely outside their authority. See 21 USC 360bbb-3, which gives no authority to any official to *force participation* in any emergency use drug or product, even under health emergencies, but only providing *access* to unlicensed drugs and products as an exemption to the safeguards of 21 USC § 355(a).

The Accused also prevented the possibility for informed consent of available/forced treatments given to their victims during COVID as well as promulgating lies about the safety, efficacy, and undisclosed harms of these forced treatments/countermeasures. They employed lies, coercion, and mandating the administration of “countermeasures” including: remdesivir, masking, social isolation, and “vaccines”⁵⁹, which provided the Accused a large financial benefit

⁵⁶ See recorded interview with Gail Macrae, recorded December 10, 2023, post on X by Children’s Health Defense, (17:28-22:16) <https://x.com/i/broadcasts/1mnxepDOZEWJX>. See also peer reviewed study noting that there is not a way for providers to fix an incorrect “unknown” vaccination status when proof of outside system vaccination was provided and that over 40-50% of those listed as “unknown” vaccination were in fact vaccinated for COVID, JAMIA Open, McGreevy, et. al., “Assessing the Immunization Information System and Chronic Health Record Interface Accuracy for COVID-19 Vaccinations,” July 2023, <https://academic.oup.com/jamiaopen/article/6/2/ooad026/7117831>. See also article that for anyone who was vaccinated somewhere other than their local hospital that is affiliated with their doctor, the vaccination proof is often limited to the single copy paper card provided to the individual, and that it is then the burden of the individual to ensure they convey that information to be manually uploaded into their EHR, IEEE Spectrum – Robert Charette, “Why Electronic Health Records Haven’t Helped U.S. With Vaccinations,” March 4, 2021, <https://spectrum.ieee.org/amp/ehr-pandemic-promises-not-kept-2652903759>.

⁵⁷ See *Supra* Note 28, Justin Leslie Whistleblower videos and reports.

⁵⁸ See Centers for Medicare & Medicaid Services, Press Release, November 4, 2021, <https://www.cms.gov/newsroom/press-releases/biden-harris-administration-issues-emergency-regulation-requiring-covid-19-vaccination-health-care> (detailing statements by President Biden, Vice President Harris, and CMS Administrator Chiquita Brooks-LaSure).

⁵⁹ Dr. Joseph Ladapo, the Florida Surgeon General, has explained that following an in depth analysis of the available scientific literature and information – that the injections marketed as “COVID-19 Vaccines” are “the Antichrist of products”. See Twitter Post containing clip of Dr. Joseph Ladapo interview, posted January 4, 2024, (<https://x.com/SaiKate108/status/1742870062804218229>). A more apt term would be to call these injections the Golgothan of vaccines. See also CMS payment incentives to hospitals for each staff and patient to be vaccinated, while also weaponizing civil monetary penalties and termination of CMS programs at hospitals – resulting in the bankruptcy of the hospitals – for hospitals who did not meet certain vaccine mandates: “Omnibus Covid-19 Health Care Staff Vaccination Interim Final Rule with Comment,” CMS.gov, page 6, 12, 13, <https://www.cms.gov/files/document/covid-19-health-care-staff-vaccination-ifc-6-national-stakeholder-call-slides.pdf>. With CMS specifically informing hospitals that, “Vaccination is the only option – this regulation does not include a testing option for unvaccinated staff” to remain CMS compliant. *Id* at 11. See also statements by Peter Hotez during interview with the American Medical Association, noting that individuals questioning the safety of vaccines



(for each COVID positive patient the hospital received a baseline 20% bonus, plus additional payments for all administered countermeasures)⁶⁰ (for example, hospitals received a \$40,000 bonus/payment from the federal government for each patient with a positive COVID diagnosis they were able to place and keep on a ventilator for more than 96 hours – which is just one countermeasure employed for profit)⁶¹ while causing serious physical injury, serious emotional distress, forcible restriction of movement and self-determination – including refusal of patient rights to leave the hospital AMA (against medical advice). Medical providers, particularly physicians, were not the lay citizens of Florida during the COVID-19 pandemic. The healthcare providers at hospitals, medical facilities, and nursing homes are individuals who undertook specialized training and knowledge and who took oaths to care for patients. They owe a fiduciary duty to Floridians. Many healthcare providers, at the direction and requirement of the Hospital Administrators and Federal Agencies that are controlled and commanded by the Accused violated their duty to ensure that every patient and citizen be afforded authentic, informed consent and individualized care, and their duty to do no harm, and were at the very least complicit with the Accused in their criminal enterprise endeavors, in many cases, explicitly contrary to the patient’s medical wishes, resulting in patient deaths. This was largely accomplished by the federal Accused and hospital administrators’ providing both financial benefit for compliance together with threats of employment⁶²/financial loss to medical providers who would not follow COVID lethal countermeasures. One nurse explained that travel nurses were paid about \$10,000 per week by FEMA, but there were no patients to care for because the COVID emergency was not real so they accepted their pay and stayed quiet about what was going on; she explained that some hospitals banned the use of Hydroxychloroquine and other treatments that everyone knew would save patients, and that the hospitals were “an assembly line to a body bag” and that “we knew they were killing 100% of the patients,” which was only possible because the victims were isolated from their loved ones and were killed more by infections from bad nursing care than from COVID; she explains as well that many hospitals made staff and providers sign gag orders as well to try and keep this conspiracy a secret and that she has video/audio recordings of many conversations with other nurses and providers admitting these truths.⁶³ No amount of financial incentive from the federal government or hospital administration, or concern in losing professional opportunities or one’s state-issued license, or social or professional stigma, removes the individual duty under oath not to knowingly/intentionally/purposefully inflict suffering and death upon another human being.⁶⁴

are “anti-vaccine, anti-science aggressors” and that he has close personal ties with the FBI and other law enforcement who have worked with him to stop these “aggressors” and their narrative about science & stating misleading coercive statements relating to the safety and efficacy of COVID vaccines, July 13, 2023, <https://www.ama-assn.org/delivering-care/public-health/dr-peter-hotez-anti-science-movement-and-declining-joe-rogan-s-debate#>.

⁶⁰ See EXHIBIT E; See EXHIBIT D.

⁶¹ EXHIBIT E, pg. 11-12.

⁶² See EXHIBIT C, Affidavit of Dr. James Miller.

⁶³ Erin Marie Olszewski, Interview on 3/3/21, (Start: 13:55-21:50), <https://www.spreaker.com/episode/03-03-21-dan-interviews-w-chris-farrell-erin-olszewski-rep-marjorie-taylor-greene-seth-jahn-carol-swain-bernie-kerik--43741567>.

⁶⁴ See Hippocratic Oath, first translated circa AD 275, <https://guides.library.jhu.edu/bioethics/codes> (stating that a physician will never give a deadly drug or make a suggestion to that effect); See The World Medical Association Declaration of Geneva Physician’s Oath, 1948, <https://www.cirp.org/library/ethics/geneva/> (that after the actions of doctors in Nazi Germany, doctors must pledge never to use their medical knowledge contrary to the laws of humanity, and the health of their patients must always be their first consideration); See the World Medical Association International Code of Medical Ethics, revised October 2022, <https://www.wma.net/policies->



Some physicians and providers did stand against the criminal harm and murder of their patients, but in most instances they lost their jobs, licenses, and/or have been forced out of their communities. Many of these physicians have since explained how the hospitals colluded with the Federal Accused to murder and abuse their patients; as well as explained how the science and data was clear and all medical providers, hospital administrators, and health officials who did follow the required protocols had complete knowledge that they were actively violating their oaths not to cause harm and to provide informed consent. A few of their initial testimonies and statements are cited here for your convenience.⁶⁵ The Accused reaped significant financial benefits from the use of harmful and ineffective “treatments” or “countermeasures” and the prevention of effective and safe healthcare, as well as profiting from death of thousands of Floridians.

BARDA (Biomedical Advanced Research and Development Authority) has explained that it utilized DOD contracts to “leverage” other monetary awards for both agencies to direct and develop the “medical countermeasures” forced upon the American people, including Floridians, as part of a joint effort by the DOD and HHS to ensure obtaining of financially lucrative⁶⁶ EUAs

post/wma-international-code-of-medical-ethics/ (stating that physicians must not allow their professional judgment to be influenced by the possibility of benefit to themselves or their institution, that physicians must take responsibility for their individual medical decisions and must not alter their sound medical judgment on the basis of instructions contrary to medical considerations, that the physician must respect the dignity and autonomy and rights of the patient to accept or refuse care, the physician must provide informed consent at every stage of care, and the physician must put the patient’s health and well-being first and must strive to prevent or minimize harm or potential harm to the patient); Ghaly and Knezevic, “What Happened to “Patient First” and “Do No Harm” Medical Principles?”, *Surgical Neurology International*, August 29, 2018, <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC6130150/>.

⁶⁵ See **EXHIBIT C**; See Brandon Drey, “‘Wouldn’t Do Anything Different’: Dr. Peter McCullough Unbowed After Winning Legal Case,” *The Daily Wire*, February 2023, <https://www.dailywire.com/news/wouldnt-do-anything-different-dr-peter-mccullough-unbowed-after-winning-legal-case>; See Marlene Lenthag, “Suspended Texas Doctor who Promoted Ivermectin as Covid Treatment Resigns from Hospital,” NBC News, November 2021, <https://www.nbcnews.com/news/us-news/suspended-texas-doctor-promoted-ivermectin-covid-treatment-resigns-hos-rcna5833> (about Dr. Mary Bowden); See Rissa Shaw, “Some Central Texas Healthcare Workers Quit, Fired as Vaccine Mandates Take Effect, KWTX, November 2021, <https://www.kwtx.com/2021/11/23/some-central-texas-healthcare-workers-quit-fired-vaccine-mandates-take-effect/>; Dr. Pierre Kory, “Four Things I Learned Treating Patients and Fighting for Medical Freedom in 2021,” *Substack: The FLCCC Alliance Community*, December 2021, <https://flccc.substack.com/p/four-things-i-learned-treating-patients>; Dr. James Miller, “An Honest Doctor’s Experiences on the Front Lines During COVID-19,” *Substack: A Midwestern Doctor*, April 2023, <https://www.midwesterndoctor.com/p/an-honest-doctors-experiences-on>; Dr. James Miller, “The Price of Truth vs Deception in Healthcare,” *Substack: A Midwestern Doctor*, June 5, 2024, https://www.midwesterndoctor.com/p/the-price-of-truth-vs-deception-in?utm_campaign=post&utm_medium=web; See recorded interview with Gail Macrae, recorded December 10, 2023, post on X by Children’s Health Defense, <https://x.com/i/broadcasts/1mnxepDOZEWJX>; See Marlene Lenthag, ABC News, “Hundreds of Hospital Staffers Fired or Suspended for Refusing COVID-19 Vaccine Mandate,” September 30, 2021, <https://abcnews.go.com/US/hundreds-hospital-staffers-fired-suspended-refusing-covid-19/story?id=80303408>; See contra., Politico, “Medical Boards get Pushback as They Try to Punish Doctors for COVID Misinformation,” February 1, 2022, <https://www.politico.com/news/2022/02/01/covid-misinfo-docs-vaccines-00003383>; Jan Jekielek and Dr. Joseph Varon, Epoch Times, American Thought Leaders, “715 Days Straight,” <https://m.theepochtimes.com/epochtv/a-lot-of-people-died-because-of-censorship-joseph-varon-doctor-who-worked-715-days-straight-in-icu-atlnow-5491783>.

⁶⁶ There is currently FOIA litigation with these agencies which are lead and directed by the Accused wherein they have continued to refuse to provide required financial disclosures regarding these issues. Open The Books, “Substack Investigation: Fauci’s Royalties and the \$350 Million Royalty Payment Stream HIDDEN by NIH,” May 16, 2022, <https://www.openthebooks.com/substack-investigation-faucis-royalties-and-the-350-million-royalty-payment-stream-hidden-by-nih/>; See FOIA documents relating to NIH Financial Disclosures of Fauci,



for the COVID-19 vaccines and other select expensive medical treatments.⁶⁷ BARDA's collusion further permitted federal agencies to enter into contracts with pharmaceutical companies that do not comply with typical federal law regulating acquisitions and intellectual property – highlighted by the U.S. Government Accountability Office because of the DOD, HHS, and BARDA's lack of transparency or accurate reporting of the passage of funds with private companies.⁶⁸ The Accused also used this authority and EUAs to prevent other long-proven cheap and effective medications from being available to the American people and Floridians.⁶⁹ Deborah

Francis Collins, and Clifford Lane, among others, <https://www.openthebooks.com/substack-investigation-faucis-royalties-and-the-350-million-royalty-payment-stream-hidden-by-nih/>; See also interview of Stephane Bancel, CEO of Moderna noting that the “FDA worked relentlessly to authorize the Moderna COVID-19 vaccine... with an emergency use authorization... they [FDA] have a defined timeline for responding and engaging with clinical-trial sponsors. But they adapted to the crisis situation.”) Interview of Stephane Bancel, McKinsey & Company, August 27, 2021, <https://www.mckinsey.com/industries/life-sciences/our-insights/modernas-path-to-vaccine-innovation-a-talk-with-ceo-stephane-bancel>; See also Moderna SEC filing, at 32, 43, <https://www.sec.gov/Archives/edgar/data/1682852/000168285220000017/mrna-20200630.htm> (noting that Moderna entered into multiple funding agreements with HHS and BARDA to “fund the advancement of mRNA-1273 to FDA licensure.”); CEO of Moderna Stephane Bancel and other Moderna leadership, such as Tal Zaks, made a total of 30 million dollars following the US federal government's over \$1.2 billion investment in their vaccine research and their statements of Moderna's COVID vaccine data, which was unverified, as quite promising. See Stephane Bancel SEC filing, May 2020, <https://www.sec.gov/Archives/edgar/data/1443340/000112760220017739/xslF345X03/form4.xml>; CBS News, May 22, 2020, “Moderna CEO and Other Execs Made Millions on Vaccine Announcement,” <https://www.cbsnews.com/news/moderna-ceo-executives-made-millions-on-vaccine-announcement/>; Pfizer, “Pfizer Receives U.S. FDA Emergency Use Authorization for Novel COVID-19 Oral Antiviral Treatment,” December 22, 2021, <https://www.pfizer.com/news/press-release/press-release-detail/pfizer-receives-us-fda-emergency-use-authorization-novel>; Julia Kollewe, The Guardian, “From Pfizer to Moderna: Who's Making Billions from COVID-19 Vaccines?” March 6, 2021, (noting that Pfizer has contracted with the US Government for a \$3.9 Billion vaccine contract, and that the founders of BioNTech became multibillionaires when their stocks soared following their vaccine deal with Pfizer and the USG)(also noting that Johnson and Johnson have expected sales of \$10Billion from the USG) <https://www.theguardian.com/business/2021/mar/06/from-pfizer-to-moderna-whos-making-billions-from-covid-vaccines>; See Forbes, “Dr. Anthony Fauci Received Big Pay Increase To Prevent Pandemics,” October 20, 2021, <https://www.forbes.com/sites/adamandrzejewski/2021/10/20/dr-anthony-faucis-little-known-biodefense-work--its-how-he-became-the-highest-paid-federal-employee/?sh=35dfae906081> (Fauci was the highest paid federal employee - paid more than the President - and since 2004, has received increasing pay adjustments for his role to prevent future pandemics and “biodefense research,” despite his funding research that caused pandemics); See Provider Relief Fund, U.S. Health and Human Services: Tracking Accountability in Government Grants System, <https://taggs.hhs.gov/Coronavirus/Providers>.

⁶⁷ Assistant Secretary for Preparedness and Response, “BARDA Strategic Plan 2022-2026,” at 17, 27-29, <https://www.medicalcountermeasures.gov/media/38717/barda-strategic-plan-2022-2026.pdf>.

⁶⁸ Here, the specific type of contracts used are “Other Transaction Agreements” – a DOD agreement that permits federal contracts without requiring compliance with certain federal procurement laws and regulations. United States Government Accountability Office, Report to Congressional Addressees, “COVID-19 HHS and DOD Transitioned Vaccine Responsibilities to HHS, but Need to Address Outstanding Issues,” at 38, <https://www.gao.gov/assets/gao-22-104453.pdf> (referencing 10 U.S.C. §2371b Authority of the Department of Defense to Carry Out Certain Prototype Projects” [now renumbered as §4022]). By utilizing these statutes, the federal agencies and pharmaceutical companies (and their leadership) were able to obtain royalty payments, even though this type of military or intelligence agency contract typically would not permit royalties. See also, United States Government Accountability Office, Report to Congressional Addressees, “COVID-19 HHS and DOD Transitioned Vaccine Responsibilities to HHS, but Need to Address Outstanding Issues,” at 39, <https://www.gao.gov/assets/gao-22-104453.pdf>.

⁶⁹ For example, Rick Bright has testified about how he worked at the direction of Janet Wookcock (FDA) to enact an EUA for Hydroxychloroquine, rather than the EIND (emergency investigational new drug) that he was ordered to file which would instead give doctors knowledge of the studies showing the safety and efficacy and permit



Birx's role with her DOD work and relationship with federal health agencies, along with her role in guiding US policy that mandated only financially lucrative COVID protocols in Florida hospitals should be further investigated.

Similarly, Major Joe Murphy⁷⁰ made a whistle-blower disclosure report that details how Peter Daszak first attempted to obtain DOD funding for the project that created the COVID-19 pandemic, with help from individuals including Ralph Baric to edit the proposal,⁷¹ but funding was denied due to it being gain-of-function research. Shortly thereafter, Daszak's project was accepted and funded by Fauci and NIAID, despite its illegality. *Id.* It has since been identified as being illegal gain-of-function work resulting in the debarring and ending funding of EcoHealth and Peter Daszak by HHS.⁷²

The Accused also established systems to move vast sums of money to and through hospitals and federal agencies via targeted bonuses and specific pharmaceuticals that would receive funding as "compliant" with NIH and Centers for Medicare and Medicaid Services ("CMS") standards/recommendations, in contrast to denying funding and applying penalties to hospitals and medical providers for prescribing treatments such as ivermectin, hydroxychloroquine, zinc, quercetin, fluvoxamine, etc. See **Exhibit E** hereto at 10-12. Hospital systems and hospital administrators, such as Advent Health, Sarasota Memorial Hospital, and Ascension, along with the other hospitals identified with this petition, also need to be

them to use the hundreds of thousands of doses that were acquired by Peter Navarro and his team in the national stockpile. However, instead these federal actors enacted an EUA, which they later retracted with false and fraudulent studies – which then made it nearly impossible for any victim to get this cheap, effective, life-saving treatment, and instead the only available treatment became EUA approved vaccines, which were known by the Accused to not prevent transmission of COVID. See: Letter to Rick Bright (BARDA) from FDA, March 28, 2020, <https://www.fda.gov/media/136534/download>; HHS ASPR BARDA, BARDA Strategic Plan, 2022-2026, May 2022, at 26-27, fn 1 at pg. 3, <https://www.medicalcountermeasures.gov/media/38717/barda-strategic-plan-2022-2026.pdf>; Department of Health and Human Services, Public Health Service, FDA, "Pharmacovigilance Memorandum," May 19, 2020, at 2, https://www.accessdata.fda.gov/drugsatfda_docs/nda/2020/OSE%20Review_Hydroxychloroquine-Cholorquine%20-%2019May2020_Redacted.pdf; Letter from RADM Denise M. Hinton (FDA) to Gary L. Disbrow (BARDA), June 15, 2020, <https://www.fda.gov/media/138945/download?attachment>; FDA, "Frequently Asked Questions on the Revocation of the Emergency Use Authorization for Hydroxychloroquine Sulfate and Chloroquine Phosphate," updated 6/19/2020, <https://www.fda.gov/media/138946/download?attachment>; See Wiseman, D.M., Kory, P., Saidi, S.A., Mazzucco, D., "Effective Post-Exposure Prophylaxis of COVID-19 Associated with Use of Hydroxychloroquine: Prospective Re-Analysis of a Public Dataset Incorporating Novel Data," medRxiv, December 2, 2020, <https://www.medrxiv.org/content/10.1101/2020.11.29.20235218v1.article-info>; It should also be investigated whether the EUAs for the COVID-19 Vaccines are legal or appropriate as individuals such as Bayer executive Stefan Oelrich has stated that the mRNA shots are "gene therapy" marketed as "vaccines" to gain public trust and acceptance, therefore not actually meeting the definition of vaccines. See Excerpt of Statement made by Stefan Oelrich at World Health Summit, 2021, posted to X on February 11, 2024, <https://twitter.com/DiedSuddenly/status/1756726278755889301?s=20>; see also full Statement made by Stefan Oelrich at World Health Summit 2021, posted to YouTube November 16, 2021, <https://www.youtube.com/watch?v=IKBmVwuv0Qc>.

⁷⁰ FOIA Disclosure of Major Joe Murphy, obtained through FOIA by Project Veritas, https://assets.ctfassets.net/syq3snmxcl9/2mVob3c1aDd8CNvVnyei6n/95af7dbfd2958d4c2b8494048b4889b5/JAG_Docs_pt1_Og_WATERMARK_OVER_Redacted.pdf; See also additional leaked documents analyzed and compiled by DRASTIC about the DARPA Project DEFUSE, which was discussed by Major Murphy, https://drasticresearch.org/wp-content/uploads/2021/10/preempt_hr00111880017_notes_v1_b-1.pdf.

⁷¹ See Letter to Peter Daszak from House Oversight Committee noting falsities in his prior testimony including the involvement of Ralph Baric and experiments occurring within the USA, April 4, 2024, <https://oversight.house.gov/wp-content/uploads/2024/04/2024.04.04-SSCP-Oversight-EC-Letter-to-Daszak.pdf>.

⁷² See *supra* note 36.



investigated further for the significant bonuses and payouts received by hospital administrators and hospital systems for subjecting victims to this malicious and fatal treatment, in violation of their moral, ethical obligations and legal duty. One example of the financial payouts to healthcare systems is that hospitals were paid extra every time they provided a patient with a “covered countermeasure” with additional payments linked to the 20% bonus hospitals received for COVID-related diagnosis codes. *Id.* These payments continue until the end of the Public Health Emergency. *Id.* At 10-11; See also **EXHIBIT D**. Florida should investigate the financial incentives and penalties pushing the intentional sedation and ventilation of victims against their wishes following refusal of early treatment and non-consensual administration of remdesivir. The suffering it has caused to Floridians must be brought to light so that justice is done on their behalf.

The trafficking of Floridian Victims described herein is similar to forced organ harvesting⁷³ in China and many other places, which is the trafficking and abuse of individuals for financial gain *related to medical procedures*.⁷⁴ The Accused engaged in the weaponization of hospitalization and “treatment” to traffic persons for financial gain from the federal government, DOD, Intelligence Agencies, and patents/royalties.

The Accused federal officials knowingly and intentionally designed policy for healthcare systems that incentivized the Accused hospital administrators and their providers to coerce or fraudulently induce Floridians to become hospital patients, often against their will, and held by physical restraint (including security personnel) from leaving, even against medical advice (“AMA”), once admitted. The Accused accomplished coercive hospital admission through their campaign to mislead Floridians, and the American people, regarding appropriate treatment measures relating to COVID-19. When victims resisted their coercion to take detrimental vaccines or treatments, or requested alternative treatment supported by literature, hospital administrators and providers isolated their victims, forced sedatives and medications and ventilation upon them, against their wishes and without informed consent. Once sedated, victims could not resist or continue to assert their lack of consent to detrimental “countermeasures.” The Accused then reaped monetary benefit from victims’ service of receiving the Accused’s products until the victims died. Notably, the prohibition on early treatment for COVID infection and the administration of remdesivir to victims exacerbated their health conditions, requiring additional treatment for which the Accused hospital administrators received further revenue.

CONCLUSION

It is the request of the victims’ families and surviving victims in the State of Florida that you begin an investigation, and upon obtaining sufficient evidence through investigation and grand jury process, that prosecution of those responsible for the COVID hospital homicide and abuse in

⁷³ See Rep. Christopher Smith, Rep. Guy Reschenthaler, etc., House Bill, H.R. 1154 – Stop Forced Organ Harvesting Act of 2023, Passed House on 3/27/2023, <https://www.congress.gov/bill/118th-congress/house-bill/1154/text?q=%7B%22search%22%3A%22hr1154%22%7D>; See Sen. Tom Cotton, S.761 – Stop Forced Organ Harvesting Act of 2023 (introduced in Senate 3/9/2023), <https://www.congress.gov/bill/118th-congress/senate-bill/761/text>; See also Texas Senate Bill 1040, effective September 1, 2023, <https://capitol.texas.gov/BillLookup/History.aspx?LegSess=88R&Bill=SB1040> (detailing medical abuse and trafficking of organs by the Chinese Communist Party, and others).

⁷⁴ CRS, “International Organ Trafficking: In Brief,” December 22, 2021, <https://humantraffickingsearch.org/wp-content/uploads/2022/03/International-Organ-Trafficking-In-Brief.pdf> (“While some experts include forms of enslavement or coercion to obtain an organ donation in the definition, **U.S. government sources typically describe such crimes as trafficking in persons**” [emphasis added]).



Florida would commence. It is the sacred responsibility of your office to obtain justice on behalf of Florida and uncover and reveal the truth of these victims' suffering and death, at the direction and behest of the Accused.

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