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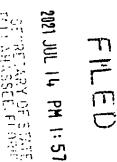
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## OFFICER / DIRECTOR RESIGNATION SECRETARY OF STATE

BRENT AGIN	DIRECTOR
I,	hereby resign as
	(Title)
INSTITUTE FOR EFFECTIVE DIAG of	GNOSIS AND TREATMENT, INC.
N13000001389 (N	ame of Corporation)
(Document Number, if known) FLORIDA	, a corporation organized under the laws of the State of
	·
	(Signature of resigning officer/director)

FILING FEE IS \$35.00

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Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314