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(Address)

(City/State/Zip/Phone #)

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COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Injury & Wellness Centers of Ft Myers
(Name of Corporation)

DOCUMENT NUMBER: P01000085996

The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

NICHOLAS DESOLA

(Name of Person)

(Name of Firm/Company)

8770 Cobblestone Preserve Ct

(Address)

Boynton Beach FL 33437

(City/State and Zip Code)

For further information concerning this matter, please call:

Nicholas Desola

(Name of Person)

at (954) 588-0505

(Area Code & Daytime Telephone Number)

Enclosed is a check for \$35.00 made payable to the Florida Department of State.

Street Address:

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

Mailing Address:

Amendment Section
Division of Corporations
Post Office Box 6327
Tallahassee, FL 32314

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2007 JUN 22 PM 3:02

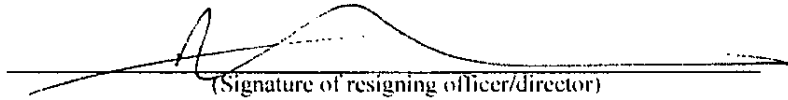
**OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION**

I, MATTHEW NIXON, hereby resign as VICE PRESIDENT
(Title)

of INQUIRY & WELLNESS CENTER OF FORT MYERS, INC.
(Name of Corporation)

P010000 85996, a corporation organized under the laws of the State of
(Document Number, if known)

Florida


(Signature of resigning officer/director)

FILING FEE IS \$35.00

Make checks payable to Florida Department of State and mail to:

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