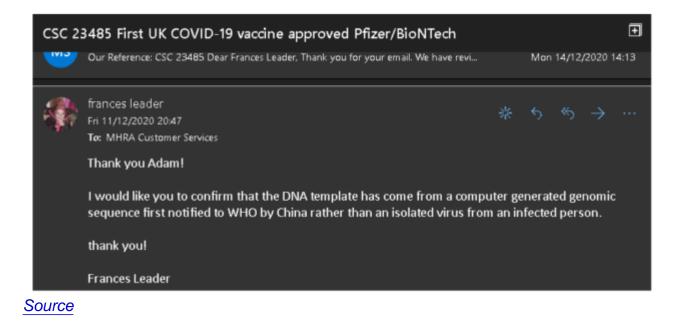


BREAKING – UK Medicine Regulator confirms COVID-19 is Man-made & the Vaccines were created using Computer Generated DNA

Description

Print PDF Email I recently came across a fantastic email exchange between Francis Leader and the UK Medicine Regulator, the MHRA – In this exchange, the MHRA admits that as regards the Covid-19 vaccines –

1. The DNA template used does not come directly from an isolated virus from an infected person 2. The DNA template (severe acute respiratory syndrome coronavirus 2 <u>GenBank 908947.3</u>), was generated via a combination of gene synthesis and recombinant DNA technology.



SC 2	
	Tơ: Yau
	Our reference: CSC 23485
	Dear Frances Leader,
	Thank you for your email.
	The information is in the Public Assessment Report: <u>https://assets.publishing.service.gov.uk</u> /government/uploads/system/uploads/attachment_data/file/944544/COVID- 19 mRNA_Vaccine_BNT162b2_UKPARPFIZER_BIONTECH15Dec2020.pdf
	A quality target product profile for the finished product has been established taking into consideration the World Health Organization's "WHO Target Product Profiles for COVID-19 Vaccines".
	The DNA template used does not come directly from an isolated virus from an infected person
	Chauld you require any further advice or anniatance on this watter places feel free to call up a
SC 2	Should you require any further advice or assistance on this matter please feel free to call us or 0203 080 6000 or reply to this email. 3485 First UK COVID-19 vaccine approved Pfizer/BioNTech
AS	0203 080 6000 or reply to this email.
	0203 080 6000 or reply to this email. 3485 First UK COVID-19 vaccine approved Pfizer/BioNTech MHRA Customer Services < MHRACustomerService s@mhra.gov.uk> ☆ ↔ → · Mon 21/12/2020 10:46
	0203 080 6000 or reply to this email. 3485 First UK COVID-19 vaccine approved Pfizer/BioNTech MHRA Customer Services < MHRACustomerService s@mhra.gov.uk> Mon 21/12/2020 10:46 To: You
	0203 080 6000 or reply to this email. 3485 First UK COVID-19 vaccine approved Pfizer/BioNTech MHRA Customer Services < MHRACustomerService s@mhra.gov.uk> Mon 21/12/2020 10:46 To: You Our reference: CSC 23485
	0203 080 6000 or reply to this email. 3485 First UK COVID-19 vaccine approved Pfizer/BioNTech MHRA Customer Services < MHRACustomerService s@mhra.gov.uk> Mon 21/12/2020 10:46 To: You Our reference: CSC 23485 Dear Frances Leader,
	0203 080 6000 or reply to this email. 3485 First UK COVID-19 vaccine approved Pfizer/BioNTech MHRA Customer Services < MHRACustomerService s@mhra.gov.uk> Mon 21/12/2020 10:46 To: You Our reference: CSC 23485 Dear Frances Leader, Just to add some further information: The DNA template(severe acute respiratory syndrome coronavirus 2, GenBank: MN908947.3)
	0203 080 6000 or reply to this email. 3485 First UK COVID-19 vaccine approved Pfizer/BioNTech MHRA Customer Services < MHRACustomerService s@mhra.gov.uk> Mon 21/12/2020 10:46 To: You Our reference: CSC 23485 Dear Frances Leader, Just to add some further information: The DNA template(severe acute respiratory syndrome coronavirus 2, GenBank: MN908947.3) was generated via a combination of gene synthesis and recombinant DNA technology. Should you require any further advice or assistance on this matter please feel free to call us on

The email chain looked too good to be true. Because, in layman's terms, their admission is the smoking gun which proves that the Covid-19 pandemic was man-made. SARS-CoV-2 was synthesised according to the MHRA. It was not isolated from nature. So I decided to write to the MHRA myself. Here is my email chain, a copy of which I have sent to the Expose...

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smoking gun which proves that the Covid-19 pandemic was man-made. SARS-CoV-2 was synthesised according to the MHRA. It was not isolated from nature. So I decided to write to the MHRA myself. Here is my email chain, a copy of which I have sent to the Expose...

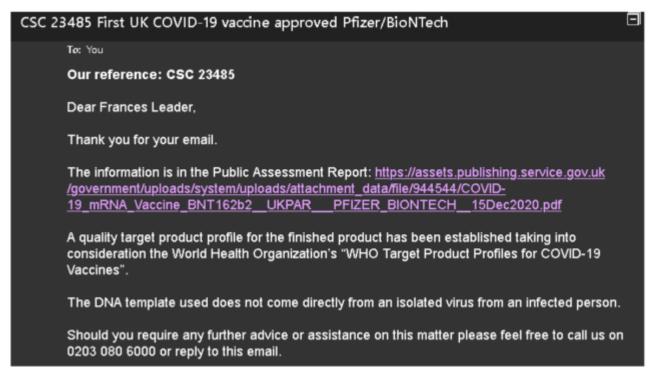
By a concerned reader

My Email Chain with the MHRA

From: Sent: 30 August 2022 19:34 To: MHRA Customer Services <u>MHRACustomerServices@mhra.gov.uk</u> Cc: <u>MHRACustomerserivces@mhra.gov.uk</u> Subject: FOI 22/983 – Confirmation

Dear Regulators,

Can you confirm whether or not this email chain on the web between yourselves and Frances Leader about the Pfizer vaccine is genuine?



The email exchange in question

CSC 23485 First UK COVID-19 vaccine approved Pfizer/BioNTech							
MS	MHRA Customer Services <mhracustomerservice s@mhra.gov.uk> Mon 21/12/2020 10:46 To: You</mhracustomerservice 	*	5	«	÷		
	Our reference: CSC 23485						
	Dear Frances Leader,						
	Just to add some further information:						
	The DNA template(severe acute respiratory syndrome coronavirus 2, GenBank: MN90894 was generated via a combination of gene synthesis and recombinant DNA technology.						
	Should you require any further advice or assistance on this matter please feel free to call us or 0203 080 6000 or reply to this email.						
	Our opening hours are Mon – Fri 9am to 5pm (excluding UK Public Holi	days)					
	With regards						

The email exchange in question

If necessary please treat this as an FOI request.

Yours gratefully Mr Redacted

Received: 21/20/22 15:01 From: MHRA Customer Services MHRACustomerserivces@mhra.gov.uk

FOI 22/983

Dear Mr Redacted,

Thank you for your information request dated 30 August 2022.

I am pleased to provide you with some of the information requested, see below.

We confirm the email responses to Frances Leader about the Pfizer vaccine are genuine.

If you disagree with how we have interpreted the Freedom of Information Act 2000 with regards to your request, you can ask for the decision to be reviewed. The review will be carried out by a senior member of the Agency who was not involved with the original decision.

If you have a query about the information provided, please reply to this email.

Please remember to quote the reference number above in any future communications.

If you were to remain dissatisfied with the outcome of the internal review, you would have the right to apply directly to the Information Commissioner for a decision. Please bear in mind that the Information Commissioner will not normally review our handling of your request unless you have first contacted us

to conduct an internal review. The Information Commissioner can be contacted at:

Information Commissioner's Office Wycliffe House Water Lane Wilmslow Cheshire SK9 5AF

Yours sincerely MHRA Customer Service Centre Medicines and Healthcare products Regulatory Agency 10 South Colonnade, Canary Wharf, London E14 4PU

Confirmation from the NIH Genbank Database

The <u>NIH GenBank database</u> which contains all viruses known to man (other than top secret bioweapons) has 8 entries for Wuhan SARS-Cov-2. From these one can plainly see that the reference virus used for the vaccines (<u>NC_045512.2</u>) was not isolated from a human and was therefore computer generated. But it is great to have that confirmed by the MHRA.

Wuhan Hu1 Reference Genome: This is <u>NC_045512.2</u>: Severe acute respiratory syndrome coronavirus 2 isolate Wuhan-Hu-1, complete genome – source – not given, December 2019 (29903 nucleotides). It is identical to <u>MN908947.3</u>: which was submitted to the NIH on 2020January5, being the 3rd computer generated iteration as detailed below...

MN908947.1: Wuhan seafood market pneumonia virus isolate Wuhan-Hu-1, complete genome. SOURCE: **None**. December 2019 (30473 nucleotides) LOCATION: **None** ONLINE: 2020January12 AUTHORS: Zhang,Y.-Z., Wu,F., Chen,Y.-M., Pei,Y.-Y., Xu,L., Wang,W., Zhao,S., Yu,B., Hu,Y., Tao,Z.-W., Song,Z.-G., Tian,J.-H., Zhang,Y.-L., Liu,Y., Zheng,J.-J., Dai,F.-H., Wang,Q.-M., She,J.-L. and Zhu,T.-Y.

SUBMITTED: Direct Submission: 05-JAN-2020 Department of Zoonoses, National Institute of Communicable Disease Control and Prevention, Chinese Center for Disease Control and Prevention, Changping Liuzi 5, Beijing 102206, China

<u>MN908947.2</u>: Wuhan seafood market pneumonia virus isolate Wuhan-Hu-1, complete genome SOURCE: **None**. December 2019 (29875 nucleotides)

LOCATION: None

ONLINE: 2020January14

AUTHORS: Zhang,Y.-Z., Wu,F., Chen,Y.-M., Pei,Y.-Y., Xu,L., Wang,W., Zhao,S., Yu,B., Hu,Y., Tao,Z.-W., Song,Z.-G., Tian,J.-H., Zhang,Y.-L., Liu,Y., Zheng,J.-J., Dai,F.-H., Wang,Q.-M., She,J.-L. and Zhu,T.-Y.

SUBMITTED: Direct Submission: 05-JAN-2020. Department of Zoonoses, National Institute of Communicable Disease Control and Prevention, Chinese Center for Disease Control and Prevention, Changping Liuzi 5, Beijing 102206, China

<u>MN908947.3</u>: Severe acute respiratory syndrome coronavirus 2 isolate Wuhan-Hu-1, complete genome SOURCE: **None**. December 2019 (29903 nucleotides)

LOCATION: None

ONLINE: 2020January17

AUTHORS: Wu,F., Zhao,S., Yu,B., Chen,Y.-M., Wang,W., Hu,Y., Song,Z.-G., Tao,Z.-W., Tian,J.-H., Pei,Y.-Y., Yuan,M.L., Zhang,Y.-L., Dai,F.-H., Liu,Y., Wang,Q.-M., Zheng,J.-J., Xu,L., Holmes,E.C. and Zhang,Y.-Z.

SUBMITTED: Direct Submission: 05-JAN-2020 Shanghai Public Health Clinical Center & School of Public Health, Fudan University, Shanghai, China

<u>MT019530</u>: Severe acute respiratory syndrome coronavirus 2 isolate BetaCoV/Wuhan/IPBCAMS-WH-02/2019, complete genome.

SOURCE: Homo sapiens; female; age 49. Bronchoalveolar lavage fluid (throat swab). 30 December 2019 (29889 nucleotides)

LOCATION: Wuhan Hubei China. Latitude: 30.59 Longitude 114.3 Wuhan No 6 Hospital Pathology Department, Xianggang Rd

COLLECTED BY: Institute of Pathogen Biology, Chinese Academy of Medical Sciences & Peking Union Medical College

ONLINE: 2020February11

AUTHORS: Ren,L., Wang,J., Jin,Q., Xiang,Z., Wu,Z., Wu,C., Liu,Y., Yang,J. and Liu,B. SUBMITTED: Direct Submission: 04-FEB-2020 NHC Key Laboratory of Systems Biology of Pathogens and Christophe Merieux Laboratory, Institute of Pathogen Biology, Chinese Academy of Medical Sciences & Peking Union Medical College, No. 9 Dong Dan San Tiao, Dong Cheng District, Beijing

<u>1805293611</u>: Severe acute respiratory syndrome coronavirus 2 isolate BetaCoV/Wuhan/IPBCAMS-WH-01/2020, complete genome

SOURCE: Homo sapiens, male age 65. Bronchoalveolar lavage fluid (throat swab). 23 December 2019 (29899 nucleotides)

Footer Tagline

LOCATION: Wuhan Hubei China. Latitude: 30.59 Longitude 114.3 Wuhan No 6 Hospital Pathology Department, Xianggang Rd

COLLECTED BY: Institute of Pathogen Biology, Chinese Academy of Medical Sciences & Peking Union Medical College

ONLINE: 2020February11

AUTHORS: Ren,L., Wang,J., Jin,Q., Xiang,Z., Li,Y., Wu,Z., Wu,C. and Liu,Y.

SUBMITTED: Direct Submission: 04-FEB-2020. NHC Key Laboratory of Systems Biology of Pathogens and Christophe Merieux Laboratory, Institute of Pathogen Biology, Chinese Academy of Medical Sciences & Peking Union Medical College; Vision Medicals Co., Ltd, No. 9 Dong Dan San Tiao, Dong Cheng District, Beijing 100061, China

MT019531: Severe acute respiratory syndrome coronavirus 2 isolate BetaCoV/Wuhan/IPBCAMS-WH-03/2020, complete genome

SOURCE: Homo sapiens, male age 41. Bronchoalveolar lavage fluid (throat swab). 30 December 2019 (29899 nucleotides)

LOCATION: Wuhan Hubei China. Latitude: 30.59 Longitude 114.3 Wuhan No 6 Hospital Pathology Department, Xianggang Rd

COLLECTED BY: Institute of Pathogen Biology, Chinese Academy of Medical Sciences & Peking Union Medical College

ONLINE: 2020February11

AUTHORS: Ren,L., Wang,J., Jin,Q., Xiang,Z., Wu,Z., Wu,C., Liu,Y., Yang,J. and Liu,B SUBMITTED: Direct Submission: 04-FEB-2020. NHC Key Laboratory of Systems Biology of Pathogens and Christophe Merieux Laboratory, Institute of Pathogen Biology, Chinese Academy of Medical Sciences & Peking Union Medical College, No. 9 Dong Dan San Tiao, Dong Cheng District, Beijing 100061, China

<u>MT019532</u>: Severe acute respiratory syndrome coronavirus 2 isolate BetaCoV/Wuhan/IPBCAMS-WH-04/2020, complete genome

SOURCE: Homo sapiens, fe male age 52. Bronchoalveolar lavage fluid (throat swab). 30 December 2019 (29890 nucleotides)

LOCATION: Wuhan Hubei China. Latitude: 30.59 Longitude 114.3 Wuhan No 6 Hospital Pathology Department, Xianggang Rd

COLLECTED BY: Institute of Pathogen Biology, Chinese Academy of Medical Sciences & Peking Union Medical College

ONLINE: 2020February11

AUTHORS: Ren,L., Wang,J., Jin,Q., Xiang,Z., Wu,Z., Wu,C., Liu,Y., Yang,J. and Liu,B. SUBMITTED: Direct Submission: 04-FEB-2020. NHC Key Laboratory of Systems Biology of Pathogens and Christophe Merieux Laboratory, Institute of Pathogen Biology, Chinese Academy of Medical Sciences & Peking Union Medical College, No. 9 Dong Dan San Tiao, Dong Cheng District, Beijing 100061, China

<u>MT019533</u>: Severe acute respiratory syndrome coronavirus 2 isolate BetaCoV/Wuhan/IPBCAMS-WH-05/2020, complete genome – source – male age 61, 1 January 2020 (29883 nucleotides) SOURCE: Homo sapiens, male age 61. Bronchoalveolar lavage fluid (throat swab). 30 December 2019 (29883 nucleotides)

LOCATION: Wuhan Hubei China. Latitude: 30.59 Longitude 114.3 Wuhan No 6 Hospital Pathology Department, Xianggang Rd

COLLECTED BY: Institute of Pathogen Biology, Chinese Academy of Medical Sciences & Peking Union Medical College

ONLINE: 2020February11

AUTHORS: Ren,L., Wang,J., Jin,Q., Xiang,Z., Wu,Z., Wu,C., Liu,Y., Yang,J. and Liu,B. SUBMITTED: Direct Submission: 04-FEB-2020. NHC Key Laboratory of Systems Biology of Pathogens and Christophe Merieux Laboratory, Institute of Pathogen Biology, Chinese Academy of

Medical Sciences & Peking Union Medical College, No. 9 Dong Dan San Tiao, Dong Cheng District, Beijing 100061, China

So the NIH database itself reveals that <u>the original Hu1 reference strain</u> was not isolated from a human host because no isolation date is given and no specific person is specified as the host, and no part of the body is specified as providing the virus and no pathology lab is specified as a location in any of the 3 iterations to what became the reference coding for the vaccines.

Whereas in the other 5 entries for SARS-CoV-2 from Wuhan, a person is actually specified in the database as the source, together with a sample collection date, a body part from which it was isolated and the location for all 5 is the <u>latitude and longitude</u> for the pathology department of the Wuhan No 6 hospital in Xianggang Rd.

So the reference strain that is used to generate every vaccine (except the Chinese and the Indian whole virus vaccines) is not from a physical virus. It is a synthetic computer-generated virus RNA code. For if it had been isolated from a human, then the database would describe that human and we would know which hospital pathology department processed the swab. But it does not. Whereas the next 5 entries were isolated from a human host with ages and sexes and infected body parts and path lab as above.

This is precisely what you would expect to find if a man-made fast mutating (unstable VERY recently man-made) virus was released and then the patients it infected had samples taken from them and sequenced.

So now we can see both from the NIH GenBank database and from the <u>CGGCGG codon pair in the</u> <u>furin cleavage site</u> on the spike protein, and from the MHRA itself that SARS-CoV-2 was man-made and designed on a computer.

It is truly a testament to the influencing power of National Intelligence agencies and the corruption of most medical journals and the mainstream media, that this is not universally known or accepted.

Wuhan is a Chinese Laundry

2019: Summer deletion of Wuhan Institute of Virology Corona Virus data bank.

2019 October: Glen Beck discovers evidence that 10 hospitals in Wuhan had Covid-19 cases – <u>https://100percentfedup.com/bombshell-glenn-beck-reveals-nih-and-moderna-worked-on-mrna-vaxx-together-before-pandemic/</u>

2019: November: University of North Carolina, Moderna and NIH began the sequencing of the 1273 amino acid spike protein vaccine (from the Wuhan Hu1 template) a month before the outbreak officially occurred. (From the interview between Dr David Martin and Reiner Fullmich)

2019 November 12: Black and Vetch send \$369,511 to Labyrinth Global Health in Ukraine for "Covid-19 Research" before Covid-19 was known or named publicly.

2019: December 31 Wuhan Municipal Health Commission report discussing COVID-19 pneumonia – deleted.

Imagine that you are Albert Bourla of Pfizer of Stéphane Bancel of Moderna and you are shocked to hear that a pandemic has begun in Wuhan caused by a pneumonia-type pathogen which nobody has isolated. But fortunately, 19 nice Chinese people in Beijing 655 miles away by air have designed a virus on a computer and uploaded it to the NIH database. Then they uploaded a modification. And then 17 of those 19 people plus Yuan M. L. and Holmes E. C. submitted yet another iteration of the computer-generated virus code from Shanghai 429 miles away by air from Wuhan and 680 miles from Beijing. All 3 submissions occurred on the same day, 2020January5. What would be your response?

My first question would be. What relationship does your computer-generated virus have with the pathogen causing the outbreak? How are they related? There is absolutely no way that question can be answered without knowing the genetic code of SARS-CoV-2. The Chinese cannot say oh we think that our computer-generated virus is close enough to the pathogenic virus which we have not sequenced. The only way that question could be answered to the satisfaction of a commercial company, in the absence of the sequencing of any isolate is for the Chinese to admit that they made the virus. You cannot represent and A is near to B if you do not know where B is.

The NIH database shows that before 2020February4, the virus had not been isolated and sequenced. And we know from the double CGG codon in the furin cleavage site which does not occur in any naturally occurring virus, and from the MHRA no less, that Covid-19 was man-made. So the only conversation that could have convinced the CEOs would have been: We know that this is the gene sequence of the virus because we made the virus and we released it and we caused the pandemic.

But there is no way that 19 state-sponsored Chinese medics would say that. That would be the end of 19 careers right there (if not the end of their freedom). They would never be able to practice medicine again. Perhaps they could risk it under strict confidentiality conditions. But in the internet age those kind of agreements are worthless. Furthermore, the Chinese deleted the entire Wuhan Institute of Virology Coronavirus Data bank in the Summer of 2019 and then deleted the Wuhan Municipal Health Commission report discussing Covid-19 pneumonia on 2019December31. So the Chinese state would absolutely have forbidden such a conversation. The chances of that conversation having occurred are therefore zero.

But the fact is that Moderna and Pfizer both made vaccines based on the computer generated <u>MN908947.3</u>. They would not have done that unless they somehow knew that the virus had that code. That information can only be known for a fact by the people who made the virus and released it. There is one golden and rather obvious law about hacking. It is this. Never leave a trail unless you have to. And if you have to then make sure it points to someone else.

It is because the virus was supplied to the NIH by the Chinese that as a hacker in another life (legally I must add) I know that it was not made in China. The Chinese laundered the genome for the true manufacturers of SARS-CoV-2, the true engineers of the Covid-19 pandemic.

Whoever did make the virus would have to have fully convinced Pfizer and Moderna that they had the correct RNA sequence of the virus or no vaccine could have been made. So without a doubt, before the start of vaccine manufacture, both companies would have known that the virus was man-made as

confirmed to Francis Leader and myself by the MHRA, and they would have to have known who made it and who released it, causing the pandemic, in order to be sure that they had the right sequence for the vaccine.

Now Moderna has several patents on SARS vaccines which cover the present mRNA jabs. It has such confidence in those patents that it is presently suing Pfizer over them. Early in the pandemic, Moderna said it would not enforce its COVID-19 patents to help others develop their own vaccines, particularly for low and middle-income countries. But in March 2022, Moderna said it expected companies such as Pfizer and BioNTech to respect its intellectual property rights. It said it would not seek damages for any activity before March 8, 2022. – https://nypost.com/2022/08/26/moderna-sues-pfizer-and-biontech-over-covid-vaccine/

Dr Malone, who invented mRNA technology, has a full mRNA vaccine patent analysis on his substack – https://rwmalonemd.substack.com/p/moderna-sues-biontechpfizer

On 2017August11 Moderna filed US 10064934B2

2017-08-11: Application filed by ModernaTx Inc 2018-09-04: Application granted 2018-09-04: Publication of US10064934B2

Their application contained the prescient words:

In some embodiments, at least one antigenic polypeptide is a betacoronavirus structural protein. For example, a betacoronavirus structural protein may be spike protein (S), envelope protein (E), nucleocapsid protein (N), membrane protein (M) or an immunogenic fragment thereof. In some embodiments, a betacoronavirus structural protein is a spike protein (S). In some embodiments, a betacoronavirus structural protein is a S1 subunit or a S2 subunit of spike protein (S) or an immunogenic fragment thereof.

That wording covers every conceivable type of mRNA vaccine for a SARS-type coronavirus.

Now President Voter Fraud Organisation O Bidenama at the start of his Jan6-powered presidency gave the US intelligence services the task of discovering the origins of the Covid-19 virus and asked them to report back to him within 90 days of 2021May26.

They released a report on their findings <u>on 2021August27</u>. Here are the wonderful words of obfuscation that they crafted...

"We judge the virus was not developed as a biological weapon. Most agencies also assess with low confidence that SARS-CoV-2 probably was not genetically engineered; however, two agencies believe there was not sufficient evidence to make an assessment either way. Finally, the IC assesses China's officials did not have foreknowledge of the virus before the initial outbreak of COVID-19 emerged."

I guess that is what a US intelligence agency cover-up looks like! Moderna and Pfizer had to know that it was genetically engineered or they could not have produced their vaccine with any certainty that it

would work at all. So the US Intelligence Community also knew. The phrase "We judge the virus was not developed as a biological weapon" is an unsolicited denial. The word "Bioweapon" does not appear in <u>Biden's brief of 2021May26</u>. No one asked them if it was a bioweapon. They were asked to investigate its origin. They were asked to tell us where the virus came from.

Their conclusion is what they want people to believe. It is written to influence people. Not to inform people. It is the same technique that DARPA used in refusing Peter Daszak's 2018March27 <u>DEFUSE</u> proposal to fund the making of a virus which was precisely what ended up in the NIH database. The funding refusal occurred when the bioweapon project was classified.

So the US Intelligence community funded the bioweapon. Peter Daszak made it with some Chinese assistance. Fauci sold the response. And Moderna Patented it before any of that ever happened. And Bill Gates started pushing vaccines and depopulation, two of the results of the bioweapon, 20 years before the pandemic. What are the chances?

https://expose-news.com/2022/10/23/covid-is-man-made-fauci-gates-daszak-moderna/ https://expose-news.com/2022/10/09/us-funded-daszak-create-covid-in-2018-for-moderna/

The Chinese were used as sub-contract manufacturers (something they are exceptionally good at). And then they were persuaded to skewer themselves by providing the gene sequence of the manmade US-funded virus to the NIH in such a way that proves it was man-made. Why did they accept that indignity?

Obviously, because they did a deal with the US. Moderna needed a source other than the EcoHealth Alliance of Peter Daszak and the Chinese agreed to provide it. President Xi is now ruling China with an iron fist under the pretext of protecting the people from Covid-19 by implementing Zero Covid policies.

In other words, the pandemic gives the Chinese authorities the power grab they desire. They acted as Patsies for the US in return for being given the pretext they needed to implement social credit score control of their people which as a testing ground for the worldwide rollout.

So here we have the Chinese submitting to the NIH the very bioweapon that the NIH itself had funded and had owned a patent for since 2018 !!

2018: US Patent <u>7279327</u> for the chimeric adaption of the naturally occurring animal SARS Coronavirus to become infectious to humans targeting lung epithelial cells is transferred from University of North Carolina to he US National Institute for Health (NIH) – who funded it in the first place.

It is now known that the aim of the globalists is to force all mankind into a cashless society where every penny you own is controlled by your government rather than you, through a social credit score connected to smart digital currency which in biblical terms is the Mark of the beast. The Beastmark even. The Beastcoin maybe?

And we begin to see that the Chinese and the American and the British and the Australian and the Canadian and the New Zealand and the Russian and the European Intelligence services are not so far apart as they seem. They all have one common goal. And Boris and Liz could not be trusted to sell us out completely to their plan (God bless them for that). But there was one who was hungry enough for

power to be trustworthy in that regard.

The plan is to force us into compliance by pandemics they design, by climate emergencies they curate, and by wars they kindle, fan and never extinguish. They are just like the DAs in democrat run cities. They kindle and fan the lawlessness. They never extinguish it. They seek the downfall of the United States, democrat-run city by democrat-run city. They are funded to abuse their power by the same people who funded Moderna to abuse our health and for the same purpose – to remove our freedom.

Dr Ryan Cole explains how the vaccines cause VAIDS

Dr Ryan Cole runs the largest clinical pathology lab in Idaho. – <u>https://totalityofevidence.com/dr-ryan-cole/</u>

Cole Diagnostics processes and reports out approximately 40,000 blood and biopsy patient samples annually. He trained at the Mayo Clinic, completing his residency in Anatomic and Clinical Pathology, as well as a fellowship in Surgical pathology, serving as chief fellow in his final year.

Ryan explains why the vaccine is more dangerous than the virus. He asks why are we being vaccinated against something that has not existed for at least 18 months? He explains how the vaccines cause VAIDS as the Expose first published over one year ago on 2021October10, on 2021October15, 2021October 23 and 2021October 27. The first piece went viral and ended up being quoted on Alex Jones through the Reese report and by President Bolsonaro of Brazil.

Well, with 12 months of hindsight we can now clearly see that Alex Jones, the Reese Report and President Bolsonaro got it right. The immune deficiency we saw statistically week on week (the vaccinated were losing ground to the unvaccinated at around 6% per week) has now manifested itself in massive increases in cancers and more aggressive wildfire cancers and higher incidences of everyday viruses and in viruses occurring at unseasonal times in demographics that they do not normally occur in..

Ryan examines cells from spike damaged people. He has given a great interview to Jan Jekielek of the Epoch Times. Here is a transcript of minutes 3:40 to 20:30. But I recommend the entire video. It brings the reader up to speed with current spike protein pathology in an understandable and charming way. This is not political science. It is not commercial science. It is medical science. It is the basis of "Informed Consent" No one should take any further vaccine shots without informing themselves of both sides of the argument in order that they can make a valid judgment rather than a brainwashed one.

No one should give or take a Covid-19 shot without watching this video:

https://www.theepochtimes.com/from-wildfire-cancers-to-foot-long-clots-dr-ryan-cole-explains-the-dangers-of-the-spike-protein_4813813.html

JAN: What you are basically talking about is the immune system has been compromised somehow in people where this is happening **RYAN:** Correct.

JAN: So explain that:

RYAN: So your immune system. For a simple way of thinking you have an immediate reacting arm of it and you have a slow acting arm. So your immediate is your innate immune system that's your

phagocytes your dendritic cells your natural killer cells. They're the marines of the immune system. They're ready at a moment's notice. Something comes in. Attack gobble gone.

Your adaptive immune system that's what everybody [asks] oh my antibodies – what about my antibodies. That's a delayed response and the B cells become plasma cells become trained to remember. So in the future, when they encounter an infection they can ramp up an antibody response.

So they work in tandem these 2 arms of the immune system. But there are countless papers now in the literature. Fohse was one of the early ones out of the Netherlands. Fohse did a study on the Pfizer vaccine showing that these marines of the immune system were no longer reacting in the robust manner they normally do. So when an invader comes in they're ready to react. And then each unit of that system, there are little pattern recognisers. So OK you remember this and this, these little toll-like receptors. You fight off this virus. You fight of that virus. You fight off this bacteria. You fight off that fungus. .So there are all these little pattern signals that the body has. Now those are downregulated too. Now the body goes. OK, I have fewer marines on the front line. The ones I do have are not doing their job and are not working. Nobody is remembering the pattern of what they are supposed to fight. So now you have a perfect storm of the ability for other infections to infect the human body.

So we saw this last year how RSV in children was out of season. And then we saw adults getting RSV and being hospitalising with Respiratory Syncytial Virus, which is usually only threatening to newborns and children under the age of 1 due to the size of their windpipe. Not just that but countless papers now talk about reactivation of shingles. There are so many upticks of shingles. There were certain papers showing the spike protein present in those shingles lesions and it's concerning because these are things that the immune system would normally say: Oh well keep that in check we'll keep that in check. But that innate, that immediate response is not as robust as it's supposed to be in the majority of people that have received the shots.

Now we don't know for how that pattern is expressed in each individual. Everybody is biologically unique. So I think its prudent to say not everybody is having that thankfully. And I think a lot of people got different doses in terms of the number of doses they got as well as purity of vials, purity of injection, purity of product. That's another question we can talk about in a bit if you'd like to. But It really begs the question of: How long are these individuals going to remain in this immune-suppressed state? The other critically important thing with these immune patterns that are shifted is some of the cells are the same ones that do keep cancers in check. So the reason you and I don't have cancer right now. You do, I do. She does. He does. We are sitting here. We have a handful of atypical cells every day. But because we have these surveyors, these natural killer cells shaking cells with every cell in our body. Right now you have 30 billion T cells circulating. So do I. And they're shaking hands with every cell in our body. Right now a little hand grenade. That cell is gone and we're good. Simple as that.

But those cells are now gone in many of these individuals or weak enough that they can't do their job of keeping those cancers in check.

And that's why I keep hearing the reports. One of the reasons I keep hearing reports of wildfire cancers in many patients. And it seems to be a dose-accumulated effect. The spike is dose-dependent toxicity. The more spike you get, the longer the body keeps making it and the more adversely many systems are affected.

JAN: So now are we talking about spike coming from Covid or are we talking spike coming from vaccines or both?

RYAN To be fair both. But interestingly spike from a natural infection doesn't persist as long. The immune system when it encounters Covid for the first time, if you haven't had the immune suppression of the shot, you have a broad non specific response to any infection. Normally in individuals that are reasonably immune competent your body is going to clear that entire virus and spike within 7-10 days. Now personally when I had Covid back in December – I, I suffer from chronic mononucleosis -. Epstein Barr virus – from before the pandemic. And it waxes and wanes and my body keeps it in check and I do a lot of different things to try to keep it in check. But after I had Covid it got worse for a couple of weeks. So that spike protein whether from the natural infection of from the injection can do these same things.

The challenge is, when we look at the work of Dr Roltgen out of Stanford that she <u>published in the</u> <u>Journal cell</u>, that pseudouridine of the mRNA shots [which is fake form of Uracil, one of the 4 bases of RNA] doesn't get broken down in the body [like Uracil does]. So that the little message, the messenger RNA – you're making billions of messages right now for every cell in your body. And so am I. And after that message says OK you have made enough protein or enough of this for the cell, or enough of that to make that enzyme, then in minutes to hours that mRNA breaks down and stops [if made from Uracil]. These synthetic injections, Dr Roltgen in her study found [with Uracil swapped from N1 Methyl Pseudouridine], were persisting for 60 days in the lymph nodes, at least 60. At which point she stopped, so she could publish. So we know the sequences are persisting in the body for at least 60 days. But in her study they also showed that the spike protein was persisting in circulation as well and in the lymph nodes. So we know that spike protein from the injections is present for a much longer period of time. Now the nay sayers will say Oh but its such a small amount. Like yer but you can kill someone with this much cyanide and this much fentanyl. I mean, when something is toxic it's toxic. So to have spike proteins circulating in just minute levels can still trigger all these immune system harms. So from the injections we know its persisting longer.

Now some people will say what about Novavax its just a protein. But its still a spike protein. And that spike protein is a pretty high dose in Novavax. And it does have a black box warning that it can go to the heart and cause myocarditis. At higher rates than some of the other shots. They don't get an out of this either. That spike protein plain and simple is pathophysiologically toxic to the human body.

JAN: What's happened with your career, with your pathology lab – 8/9 months is a long time?.

RYAN: Its been a bumpy road. When health and wellness and life and the oath I took to a patient's on the line I won't quit what I'm doing. I've taken a lot of darts from adversarial media companies, adversarial insurance companies, adversarial hospital systems. A lot of criticism. I have had a 26 year career being a physician. Seen 500,000 patients in that career. I have yet to have one patient care complaint against me in 26 years – never had a law suit. And now all of as sudden I find myself in the crosshairs for sharing science. So because of that I lost one of my major insurance contracts. For my quote unprofessional behaviour in talking about Ivermectin and helping save a handful of lives with that for free. I never charged a patient. And then they say well gosh you're a pathologist. Well I did years of emergency medicine, years of family medicine, years of dermatology and never quit being a doctor. I am the doctor to the doctor as the laboratory physical now. So a lost a major contract there to the point that I lost a lot of employees. My business has gone down. My blood business has been affected

drastically to where I am turning it over to another independent laboratory. My name is now mud in my region, even though I seem to be a folk hero in other people's eyes. I never quit being a good pathologist

I trained at the Mayo Clinic. I trained at the beast institution of the world. I've seen the weirdest cases in the world. I even had one of my friends a physician, he's like: You're a great pathologist but I have patients complaining you're not sending to him are you? Because of what the media says about me. Not because I don't have a good diagnostic skill set and a broad knowledge base. So yer I am taking it on the chin financially.

And I have invited anyone and everyone in the world. If you disagree with me bring better data. Bring better data. Crickets. 9 months ago we talked about this. Crickets 9 months later.

I've yet to have a colleague say: You know I wanna sit down and show you where you're wrong. Because I am always willing to be wrong. That's science. Science is asking the question and testing the hypothesis and saying huh we could be right or wrong but let's prove it. But Life's been a little rougher for me. Thankfully I have some transitional things I am working on. I have become somewhat of a medical educator which I enjoy. Still writing my book. I will be doing more of an autopsy service for families around the world as I get a lot of those requests now: Was it the vaccine? Was it not the vaccine?

JAN: You know I was looking at one of your slides. The slide showed spike protein in the endothelium of blood vessels.

RYAN: And this is something that's been frustrating. In pathology for eons I mean decades and decades and decades we've had the ability to isolate proteins within cells. So any cell in your body has hundreds if not thousands of different types of proteins. And we can determine by making a very specific antibody to that protein and then we tag and little antibody to its tail and when it binds to it we know its present and on the tail of that second antibody we can put what's called a chromagen a colour and make it glow. So under the microscope we can take any tissue in the body. So like if someone has a lung cancer it will have a certain type of keratin. If someone has an ovarian cancer it will have a different type of keratin. And there's a lot of different cytoskeletal keratins in the body.

So we can stain these and have been able to do this forever in medicine. With onset of SARS-CoV-2 the spike proteins have a very specific protein shape. So you can take these proteins inject them into a hamster a rabbit a goat. They will make an antibody against it. Then you can isolate those antibodies. And now we can use those in the laboratory against very specific protein pieces. You don't even have to do the whole thing. You can just do one segment of it. Then you make it glow. Then you look at it under the scope in those vessels. These little dots. It's like everywhere that I see that colour glow now I know spike protein is present.

And so we've seen this. It's in the medical literature now. There's a necrotising encephalitis. That was the one I was showing you that had just been published in an older gentleman that passed away. His heart was also replete with spike protein as well.

And so the spike protein we can identify in any tissues where it is present or absent. And then the question becomes: Well is it from the vaccine?. Good question. We also stain for the nucleocapsid (nucleus case protein). If it were a whole viral infection both proteins would be identifiable and present

in that SAME tissue. If the nucleocapsid is absent and only the spike is present then we know that it is from those persistent vaccine spike proteins that are circulating and depositing throughout the body.

JAN: So in the pathology that you have done how often is it the disease versus the vaccine spike?

RYAN: Early on we saw a lot of Covid fingers and toes. So Covid primarily was a clotting disease. Now that omicron is here its not as much of a clotting disease. We don't see the same pathophysiology with – I call it Coldvid, not Covid – that's one thing that's changed because in the majority of people it is a cold, its a common cold. The vaccine spike is still the original Wuhan spike. That's the clotting spike. The Omicron spike is not the clotting spike. So when I see individuals. Its a 20 fold-ish less clotting effect that we see from Omicron compared to say the Wuhan Alpha, the Delta, the Gamma, the earlier variants. It's just acting differently because of the mutations it's acquired. Because with that vaccine spike and the early variant spike the S1 and the S2 split off because of that little furin cleavage protein. And then the S1 circulates and becomes very inflammatory and that's what we identify in those tissues we are talking about. With Omicron that doesn't happen. And because of that now we know **the vaccine is more dangerous than the virus itself**. Because the vaccine still has all those pro clotting abilities, has all those inflammatory abilities. Whereas the spike from Omicron does not.

So the fact that the Wuhan spike is still present in any of the vaccines, when in circulation it went extinct more than a year and half ago now is really perplexing.

It's an extinct virus. So we're vaccinating against something that doesn't exist anymore technically. And has all risk with zero benefit. It can cause the clotting still. It can trigger those inflammatory pathways.

It can get into the nucleus of our T cells we are talking about. It can get into our mitochondria and destroy our mitochondrial function that's the respiration of every cell in our body. It can bind to the ACE2 receptors on ovarian cells. It can destroy metabolic pathways to where your liver becomes fatty. It can destroy kidney capacity. It causes brain fog because it can cross the blood brain barrier.

Omicron doesn't do that.

It may to a tiny decree so don't quote me as saying never. Never say never. Omicron is mutating and I have reports from colleagues in the upper Midwest saying that they are seeing more pulmonary covid again. But I don't know if that's in the vaccinated individuals and not the unvaccinated. The probability is the vaccinated, based on data coming out of other countries. **(3:50-20:30 minutes)**.

Again I advise watching the entire video. He goes on to show how easy it is for pathologists to check for spike proteins in the cells of SADS victims. But he says most of them just do not do it. So Ryan can tell if your problems arise from the virus or from the vaccine by analysing infected cells for the spike protein and the nucleocapsid protein. The virus has the spike protein (S), the nucleocapsid protein (N: which they would have made the vaccines out of if the vaccines were about health) the membrane protein (M) and the envelope protein (E). The vaccine only has the spike protein (S). So if your cells have both the spike (S) and the nucleocapsid (N) proteins then the virus has done the damage. If they only have the spike protein (S) then the vaccine has done the damage.

Ryan explains that the more spikes you have and the longer they last, the more damage is done. So the vaccines are far more dangerous that the virus, since they expose your body to much longer-lasting spikes. And even more so because the Omicron spike is 20x less pathogenic than the man-

made Wuhan Hu1 US intelligence services Bioweapon in every single vaccine.

Most of the biopsies presented at the FLCCC Educational Conference Orlando Florida 2022 October14-16 – <u>https://covid19criticalcare.com/conference/</u> – had damaged cells that expressed only spike protein, rather than other SARS-CoV-2 proteins. This suggests spike injuries are caused by vaccination and not natural infection, because in infection other SARS-CoV-2 proteins including nucleocapsid proteins are present in addition to the spike protein. – <u>https://www.theepochtimes.com/health/covid-19-vaccine-injury-syndrome-not-a-disease-flcccconference-shares-how-to-treat-it_4802240.html is another video worth watching.</u>

It also suggests that long Covid is in fact vaccine damage syndrome.

Inactivated whole virus vaccines

The Russian Sputnik V has the <u>MN908947.3</u>: spike protein DNA and is similar to the Astra Zeneca Vaccine but with a different viral vector for each of the two shots

The Chinese State-owned SinoPharm makes the BBIBP-CorV inactivated whole virus vaccine. – <u>https://www.ncbi.nlm.nih.gov/pmc/articles/PMC7275151/</u> – Really good biochemistry!

We isolated three SARS-CoV-2 strains from the bronchoalveolar lavage samples or throat swabs of three hospitalized patients from the recent COVID-19 outbreak to develop preclinical in vitro neutralization and challenge models for an inactivated SARS-CoV-2 vaccine candidate. The three strains were 19nCoV-CDC-Tan-HB02 (HB02), 19nCoV-CDC-Tan-Strain03 (CQ01), and 19nCoV-CDC-Tan-Strain04 (QD01). Notably, all of these strains were isolated from Vero cells, which have been certified by WHO for vaccine production. Vero cells, but not other cell lines, were infected via the throat swabs of patients to prevent possible mutations during viral culture and isolation.

They use beta-propiolactone which modifies the virus's genetic material, leaving it unable to use cell machinery to replicate and therefore inactivated. So Sinopharm took a throat swab of the virus from 3 patients and tested these 3 strains of the virus for replication speed and genetic stability and antibody production etc. They chose the HB02 strain. Then they grow copies of that virus in Vero cells and inactivate them with he beta-propiolactone. The inactivated virus induces antibodies against its spike protein and its nucleocapsid protein.

So here again the spike protein is present but not the computer generated one. This seems to me to be the safest vaccine of them all. It is still no good as in introduces loads of spike proteins. But it is the least pathogenic of them all, because it is created from the whole virus rather than the pathogenic spike protein. And even more important it is not gene altering like the mRNA vaccines. There are two further inactivated whole virus vaccines...

The private Chinese company Sinovac developed CoronaVac. <u>Here is a great explanation of how it is</u> made and how it works

Sinovac Biotech Ltd. CoronaVac® COVID-19 Vaccine is based on an inactivated pathogen

made by growing the whole virus in a lab and then killing it. CoronaVac is a 2-dose ?- propiolactone-inactivated, aluminum hydroxide-adjuvanted vaccine.

A theoretical advantage of inactivated vaccines is that they contain additional viral proteins, including nucleoprotein, which could broaden protection beyond anti-spike protein responses and reduce the escape of variants from vaccine immunity. For example, a peer-reviewed study published on Nov. 24, 2021, concluded that 'CoronaVac induces higher CD4+ and CD8+ T-cell responses to the structural protein than (Pfizer-BioNTech) BNT162b2 vaccine.

Bharat Biotech and the Indian Council of Medical Research co-developed (BBV152).. <u>Here is a great</u> explanation of how it is made and how it works.

The trouble with all 3 of them is that they are very very close to the original man-made Wuhan Hu1 US Intelligence-funded bioweapon having been isolated not long after its release. And they do not work against Omicron. Which if you think about it, since they are made from the entire virus, means that neither can any vaccine based on MN908947.3 work against Omicron. So they need to be fully updated to become inactivated versions of the Omicron variant. The has been done by SinoPharm and the new Omicron targeting vaccine was cleared for clinical trials in Hong Kong on 2022April16 and then up until today – nothing?!?!?

It is now clear to me that the computer-generated US intelligence funded Peter Daszak researched and designed and Fauci response organised bioweapon was released in China near the Wuhan lab or perhaps in the Wuhan lab in order to Launder its origin just as the submission of the 3x MN908947 virus genomes from Beijing and Shanghai did. But being man-made and not naturally occurring, it was unstable and mutated very quickly into the strains isolated for the SinoPharm inactivated whole virus vaccine. Then it mutated and mutated until it returned to the common cold from whence it came.

Herd Immunity was reached within a year in the 1957 and 1968 Asian Flu and Hong Kong flu pandemics with nothing but Vitamin C. Had we treated Covid-19 with Vitamin C and Vitamin D, the pandemic would have finished last year.

It is vaccine immune system damage that has kept the thing going. And that just happens to be in Moderna's and in Pfizer's best interests. More importantly this pandemic has to be kept going until they can get the social credit score smart digital currency rolled out worldwide.

But the fact remains that even today, every single vaccine has the Wuhan Hu1 spike protein in it or a very very close relative. That will change if the Omicron-specific SinoPharm vaccine ever finishes its clinical trials. I am guessing that will not happen until after the social credit score smart digital currency has been rolled out.

Omicron is what God or nature did to the bioweapon. He or she neutralised it. Even Bill Gates admitted that Omicron did a better job than the vaccines in ending the pandemic. But Moderna and Pfizer do not want to end the pandemic. That is why they only half updated their bivalent vaccines rather than fully updating them. I mean where would their profits come from if the pandemic ended tomorrow? Although to be fair to Pfizer, they did produce a fully updated vaccine but the CRC failed to authorise it. So this is not only about money. It is about something more. It is about control. That is the territory of the Intelligence services of the world. For they have all colluded to ensure that the citizens of their

countries are continuously being infected with the pathological spike protein of an extinct bioweapon.

Conclusion

Dr Ryan Cole cannot understand why the bivalent vaccine still contains the Wuhan Hu1 US Intelligence Services-funded bioweapon of Daszak and Fauci and Moderna, in circumstances where that spike has been extinct for at least 18 months. The reason is simple. The purpose of the entire exercise was originally and still is, to fill people up with the bioweapon. There is no vaccine which does not contain the 1273 amino acid computer-generated spike (or a very close relative thereof), laundered through Wuhan, Beijing and Shanghai. But generated on a computer funded by the people who judge that it is not a bioweapon, whilst at the same time claiming to have no conclusive intelligence as to its origin.

Dr Naomi Wolf when interviewed by Mark Steyn of GBNews said:

Mark, I'm Jewish, and you know I can say this. I don't think you're going too far. I think your going exactly where you should go. It was the doctors in pre Nazi Germany in the early 30s who were co-opted by the National Socialists and sent to do exactly exactly what were seeing kind of replaying now. It was the medical organisations in the early 30s who were emboldened to be the arbiters of you know worthy of life, or unworthy of life and to kind of medicalise and pathologise dissent or difference.

Um so were seeing a wholesale purchasing of the medical establishment in the United States, in Britain and in countries round the world, to do things much more serious. Let me just give one example. You brought this up and your so right. I have 3500 experts at the war room daily cloud Pfizer documents research volunteer effort. Medical experts, scientific experts going through the Pfizer documents. and indeed they are finding horrific harms against human reproduction. 360 degree harms. Who should be stepping up to announce this? The AMA. Who is announcing it? It's people like you and me, the last remaining independent journalists. But this is a scandal that the human race has never seen before – of such magnitude.

Worldwide Intelligence Services Coup

1. Get control of the microphone. The mainstream media and the mainstream internet media. (Jack Dorsey suggested that Mark Zuckerberg called his new Meta Company the "Central Intelligence Corporation").

2. Get control of the banks. (I guess that might be done with money).

3. Get control of the medical profession (by regulator-mandated treatment protocols and removing practice licences of those who refuse to submit)

4. Get control of national governments (by electronic voting machines, false opinion polls, information suppression, misinformation promotion and by paying people to cheat – that works well)

5. Get control of the people through martial law/lockdown law as a result of war, hyped environmental

threats, hyped pandemic threats etc.

6. Get control of everybody's finances (by implementing social credit score-controlled digital smart currencies)

7. Get control of everybody's health (by destroying their immune systems and replacing them with pharmaceutical immunity, which is only available if your social credit score is good)

My social credit score wouldn't qualify for one paracetamol. This is not the fault of Fauci, Daszak, Collins, Walenski, Trudeau, Kissinger, Putin, Xi, Obama, Blair, Bush, Gates, Zuckerberg, Schwab, or any other individual bad actor. It is the fault of the national intelligence services that have colluded to enslave us all.

The individuals whom I presently condemn, have merely sold out to that collusion. We will get nowhere by attacking them. This does not get fixed until we fix our intelligence services. They are patient zero in the real pandemic affecting mankind. A pandemic of control freakery. A pandemic resulting in Slavery23 rather than Covid19.

Here we are racing to condemn our ancestors for having slaves, whilst passively presenting our shoulders to the genetic yoke of our new slave masters

But why are they doing this right now? Why have they made this agreement to enslave us by dastardly skullduggery at this particular time?

Well, it is because they are about to lose us. They are about to lose us to the next administration of mankind on earth. To the next political system for this planet. The Kingdom of God. And the more tightly they control us, the closer they are to losing us, and the closer we are to that Kingdom. Many people, Muslims and Christians and Jews, want to know when Jesus or at least the messiah, will come. He comes to release us from Slavery23 just as Moses was sent by God to release the Jews from Slavery1513Nisan14 BC in Egypt. So plainly we must be enslaved in the Egypt of this world before he can come to release us into the real promised land of the Kingdom of God – which our enslavers would deny us!

So I say to Tony Fauci, Peter Daszak, Francis Collins, Rochelle Walenski, Justin Trudeau, Henry Kissinger, Vladimir Putin, Xi Jing Ping, Barack Obama, Tony Blair, George Bush, Bill Gates, Mark Zuckerberg, Klaus Schwab are all the other Egyptians out there re-enacting the enslavement of God's people: All the Egyptians that tried to prevent that Exodus died in the red sea by the hand of God. Yet looking more positively, all those who chased after God's people were baptised in that sea by God himself (somewhat involuntarily). So chase after us by all means. But do not try and prevent us from leaving!

Category

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- 2. Disasters-Crisis-Depopulation-Genocide
- 3. Health-Wellness-Healing-Nutrition & Fitness
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