

L11000128285

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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2013 JAN 11 PM 12:43  
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TALLAHASSEE FLORIDA

JAN 14 2013

D. BRUCE



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

December 21, 2012

RENEE WRIGHTMAN  
LASHBROOK, WOLLARD & FASANO, P.A.  
3201 GRIFFIN ROAD, SUITE 400  
FT. LAUDERDALE, FL 33312

SUBJECT: AXES MEDICAL RESEARCH, LLC  
Ref. Number: L11000128285

We have received your document for AXES MEDICAL RESEARCH, LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Deborah Bruce  
Regulatory Specialist II

Letter Number: 312A00030170

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## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Axes Medical Research, LLC  
(Name of Limited Liability Company)

The enclosed member, managing member or manager resignation and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to:

Renee Wrightman

(Contact Person)

Lashbrook, Wollard & Fasano, P.A.

(Firm/Company)

3201 Griffin Road, Suite 400

(Address)

Ft. Lauderdale, FL 33312

(City/State and Zip Code)

For further information concerning this matter, please call:

Dr. Lorena Lewy

(Name of Contact Person)

at ( 954 )

967-0500

(Area Code & Daytime Telephone Number)

Enclosed please find a check made payable to the Florida Department of State for:

☐ \$25 Filing Fee

☐ \$55 Filing Fee &  
Certified Copy

**STREET/COURIER ADDRESS:**

Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, Florida 32301

**MAILING ADDRESS:**

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

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FLORIDA DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS

**RESIGNATION OF MEMBER, MANAGING MEMBER OR MANAGER  
FROM FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY**


1. The name of the limited liability company as it appears on the records of the Florida Department of State is: Axes Medical Research, LLC

2. This limited liability company was organized under the laws of:  
Florida

3. The Florida document/registration number of this limited liability company is:  
L11000128285

4. I, Ana L. Lewy-Alterbaum, MD, hereby resign as a MGRM  
(Print Name of Person Resigning) (Print Title)

of this limited liability company and affirm the limited liability company has been notified of my resignation in writing.

  
Signature of Resigning Member, Managing Member or Manager

Filing Fee: \$25.00 (Required)  
Certified Copy: \$30.00 (Optional)

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TALLAHASSEE FL 32399

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