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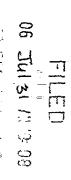
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Special Instructions to	Filing Officer:	
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Office Use Only



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COVER LETTER

TO: Registration S Division of C			
SUBJECT:	ATX Investment (Name of Limite	5 , LLC d Liability Company)	
The enclosed Articles	of Organization and fee(s) are s	ubmitted for filing.	
Please return all corres	pondence concerning this matte	er to the following:	
Į	Enc Tran		
		Name of Person)	
		(C)	
		(Firm/Company)	
	3069 Brightwater ((Address)	
	Cissimmee FL 347 (City	44 /State and Zip Code)	
For further information	n concerning this matter, please	call:	
Enic	e of Person)	at (407) 616-42 (Area Code & Daytime To	elephone Number)
(0.1.1.00.00,	(, <u>_</u>	,
Enclosed is a check	for the following amount:		
¥\$125.00 Filing Fee	\$130.00 Filing Fee & Certificate of Status	\$155.00 Filing Fee & Certified Copy (additional copy is enclosed)	\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	Mailing Address Registration Section Division of Corporations P.O. Boy 6327	Street/Courier Addres Registration Section Division of Corporatio	

P.O. Box 6327 Tallahassee, FL 32314

Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name The name of the Lin	e: nited Liability Compan	y is:				
	vestments, LLC Limited Liability Company, "	Limited Comp	any" or their abbr	reviation "LLC	," or "L.C.,")	
ARTICLE II - Add The mailing address	ress: and street address of the	ne principa	l office of the	: Limited Li	iability Compa	ıny is:
Principal Office Ad	dress:	<u>Mai</u>	ling Address	<u>:</u>		
3069 Brightn Kissimmer Fl	voter Ct L 34744		069 Bright Issimmee	wder C FL 3470	+ + <u>+</u>	
(The Limited Liability Conbusiness entity with an act	gistered Agent, Regist apany cannot serve as its own be tive Florida registration.) orida street address of the	Registered Ag	ent. You must des	ignate an indiv		
			· ::		画世	77
_	Eric Tran	ame				
	3069 Bright Florida stree	water C	+			Ö
_	Florida stree	et address (P.	O. Box <u>NOT</u> ac	ceptable)	- T. 5	
-	Kissimmee City, St	FL ate, and Zip	34744		₹ 7 8	
liability company registered agent and statutes relating to	as registered agent and at the place designated lagree to act in this cap the proper and complet ations of my position as	l in this cer acity. I fun te performa	tificate, I here ther agree to ince of my dut	by accept th comply with ies, and I an	he appointment in the provisions in familiar with	t as s of all a and

(CONTINUED) Page 1 of 2

Registered Agent's Signature (REQUIRED)

ARTICLE IV- Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

MGR	Eric Tran 3069 Bnabtwater Ct
	Kissimmer FL 34744
	and the second s
	<u> </u>
(Use attachment if necessary)	
(Use attachment if necessary) CLE V: Effective date, if other than the date effective date is listed, the date must be specified ages after the date of filing.)	e of filing: (OPTIONAL) ecific and cannot be more than five business days prior
CLE V: Effective date, if other than the date effective date is listed, the date must be spe	e of filing: (OPTIONAL) ecific and cannot be more than five business days prior

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent
\$ 30.00 Certified Copy (Optional)
\$ 5.00 Certificate of Status (Optional)

Typed or printed name of signee

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