L08000104686

Florida Department of State
Division of Corporations
Public Access System

Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H08000271446 3)))

H08000271446 3ABC%

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:
Division of Corporations
Fax Number : (850)617-6383

From:
Account Name : PREMIER CORPORATE SERVICES INC
Account Number : I20080000023
Phone : (651)225-9500
Fax Number : (651)225-9579

FILED
2008 DEC 11 PM 12:45
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN

THE FISHER GROUP HEDGE FUND I LLC

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	$25.00

RECEIVED
08 DEC 11 AM 6:35
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

A. LUNT
DEC 12 2008
EXAMINER

Electronic Filing Menu Corporate Filing Menu Help

ARTICLES OF CORRECTION
FOR
FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY

Pursuant to section 608.4115, F.S., this document is being submitted **within the required 30 business days** to correct the **attached** articles of organization or application to transact business in Florida.

FIRST: The name of the limited liability company is:
The Fisher Group Hedge Fund I LLC

SECOND: The articles of organization or the application to transact business

(CHECK THE APPROPRIATE BOX AND COMPLETE THE APPLICABLE STATEMENT

☑ Contains an incorrect statement. The incorrect statement, the reason the statement is incorrect, and the corrected statement are as follows:
The Name: Fisher Group Hedge Fund I LLC stated in Article I is not the correct name of the limited liability company. The wrong name was provided in error. The correct name of the limited liability company is The Fisher Group Event Driven/Relative Value Fund LLC.

OR

☐ Was defectively signed. The manner in which the document was defectively signed and the appropriate correction are as follows:

FILED
2008 DEC 11 PM 12:45
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Dated: December 10, 2008

Signature of a member or authorized representative of a member

Susan R. McMaster, Authorized Representative
Typed or printed name of signee

Filing Fee: $25.00
Certified Copy: $30.00 (optional)

CR2E062 (08/05)