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To:

Division of Corporations

Fax Number : (850) 617-6383

From:

Account Name : PREMIER CORPORATE SERVICES INC

Account Number : 120080000023

Fax Number

Phone : (651)225-9500 : (651)225-9579

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN

THE FISHER GROUP CORPORATE DEBIT FUND LLC

Certificate of Status	0
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EXAMINER

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ARTICLES OF CORRECTION FOR FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY

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

FIRST	The name of the limited liab	oility comp	any is:		
The F	isher Group Corporate Debit Fur	nd LLC	***************************************		
SECO	ND: The articles of organization	or the app	lication to transact business		
(CH	ECK THE APPROPRIATE BOX A	ND COMP	LETE THE APPLICABLE ST	ATEMENT	
\square	Contains an incorrect statement. The incorrect statement, the reason the statement is incorrect, and the corrected statement are as follows: The name of the LLC was improperly stated in Article I as The Fisher Group				
	Corporate Debit Fund LLC. The name contained a typographical error. The				
	Correct name of the LLC is The	Fisher G	roup Corporate Debt Fund	LLC.	
,					
	<u>OR</u>				
	Was defectively signed. The manner in which the document was defectively signed and the appropriate correction is as follows:				
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	1/1			THE P	
Dated:	November 10		2008	STATE LORIDA	D
	Sue R Mi	Mark	<u> </u>	.2 TM	
	Signature of a member or authorized representative of a member				
	Susan R. McMaster, Authorized Agent				
	Typed or printed name of signec				
	Filing Fe Certified		\$25.00 \$30.00 (optional)		

Electronic Articles of Organization For Florida Limited Liability Company

L08000104622 FILED 8:00 AM November 10, 2008 Sec, Of State

Article I

The name of the Limited Liability Company is:

THE FISHER GROUP CORPORATE DEBIT FUND LLC

Article II

The street address of the principal office of the Limited Liability Company is:

4801 PGA BLVD. PALM BEACH GARDENS, FL. US 33418

The mailing address of the Limited Liability Company is:

4801 PGA BLVD.. PALM BEACH GARDENS, FL. US 33418

Article III

The purpose for which this Limited Liability Company is organized is: ANY AND ALL LAWFUL BUSINESS.

Article IV

The name and Florida street address of the registered agent is:

NRAI SERVICES, INC. 2731 EXECUTIVE PARK DRIVE SUITE 4 WESTON, FL. 33331

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

Registered Agent Signature: SUE JOHNSON

Article V

The name and address of managing members/managers are:

Title: MGR MARTINIQUE HOTEL, INC. TWO TOWNE SQUARE, SUITE 900 SQUTHFIELD, MI. 48076 US L08000104622 FILED 8:00 AM November 10, 2008 Sec. Of State

Article VI

The effective date for this Limited Liability Company shall be: 11/10/2008

Signature of member or an authorized representative of a member Signature: SUSAN R. MCMASTER