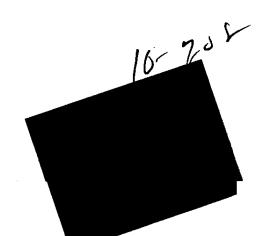
(Re	questor's Name)			
•				
(Ad	dress)			
(, , ,	u.000,			
(Address)				
		•		
(Cit	y/State/Zip/Phone	e #)		
(•		
PICK-UP	WAIT	MAIL		
Ш				
(Bu	siness Entity Nan	ne)		
•	·	•		
(De	aumant Numbar			
(Document Number)				
•				
Certified Copies Certificates of Status				
Special Instructions to	Filing Officer:			
	•			
		·		
		j		
		·		

Office Use Only





400136197684

09/30/08--01024--020 **87.50

2008 SEP 30 AM 3: 34

COVER LETTER

TO: Amendment Section Division of Corporations	
SUBJECT: BLUEBAY ADVISORS USA INC	
(Name of Corporation)	
DOCUMENT NUMBER: P07000011186	
The enclosed Resignation of Registered Agent for a Corporation and fee are submitted for the	filing.
Please return all correspondence concerning this matter to the following:	
Mary Jo Spalinger	
(Name of Person)	
Business Filings Incorporated	
(Name of Firm/Company)	
8040 Excelsior Drive #200	
(Address)	
Madison, WI 53717	
(City/State and Zip Code)	
For further information concerning this matter, please call:	
same at (800) 981-7183 (Name of Person) (Area Code & Daytime Telephone Number)	
(Name of Person) (Area Code & Daytime Telephone Number)	
Enclosed is a check made navable to the Florida Department of State for \$87.50 for an activ	ve cornorat

Enclosed is a check made payable to the Florida Department of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.

Street Address:
Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Mailing Address:
Amendment Section
Division of Corporations
Post Office Box 6327
Tallahassee, FL 32314

RESIGNATION OF REGISTERED AGENT FOR A CORPORATION

Pursuant to the prov	visions of sections 60	07.0502(2), 617.0502(2), 607.1509, or 6	17.1509,
Florida Statutes, the	undersigned. Bu	siness Filings Incorporated	
,		(Name of Registered Agent)	
hereby resigns as Re	egistered Agent for	BLUEBAY ADVISORS USA INC	
(Name of Corporation)		(Name of Corporation)	
P07000011186			
(Document Nu	imber, if known)		
A copy of this resig	nation was mailed to	the above listed corporation at its last k	nown address.
The agency is termithis statement is file		discontinued on the 31st day after the day	ate on which
_	Mary Jo	Spalin ger gnature of Resigning Agent)	
If signing on behalf	of an entity:		
	Mary Jo Spalinge	r	2008 SEP SECRET
_	(Typed or Printed Name)	EP 30
	Asst. Sec. for Bus	iness Filings Incorporated	
		(Capacity)	SEE SEE

Fee for filing this document:

\$87.50 - Active corporation
\$35.00 - Administratively dissolved/voluntarily dissolved/
withdrawn corporation

Make checks payable to Florida Department of State and mail to:
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314