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TRANSMITTAL LETTER

Amendment Section Division of Corporations

TO:

SUBJECT:	AR INFO	SYSTEMS Name of Corpora	INC
	(Name of Corpora	tion)
DOCUMENT NUMBER:_	P 160	00057531	
The enclosed Officer/Director	or Resignation fo	r a Corporation	and fee are submitted for filing
Please return all corresponde	ence concerning t	his matter to the	e following:
SURAM	CRINIVAS		
(Name	(RINIVAL of Person)	· , ,	
AR INFO SYSTE	MS INC		
	Firm/Company)		
1568 SW, 186 Fer, Pen	ubroke Pines	FL-33029	
(Ac	ddress)		
(City/State	and Zip Code)		
For further information conc	erning this matte	r, please call:	
Suram Sriniu	as	at (9.54)	899 9092 & Daytime Telephone Number)
(Name of Pers	son)	(Area Code	& Daytime Telephone Number)
Enclosed is a check for \$35.0	00 made payable	to the Florida D	epartment of State.
Mailing Address: Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Amendi Division 2661 Ex	Address: ment Section of Corporation recutive Center (ssee, FL 32301	s Circle

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

2016 OCT 24 AM 8: 03

l,	NALABOLU ABHISHEK	, hereby resign as_	VICE PRESIDENT (V.P)
			(Title)
of	AR INFO SYSTEMS IN		
	(Name of	Corporation)	•
		a corporation organized und	der the laws of the State of
	(Document Number, if known)		
	FLORIDA .		
		Minde	
	/Sia	mature of resigning officer/direct	or)

FILING FEE IS \$35.00

Make checks payable to Florida Department of State and mail to:

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