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COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: AROMED SUPPLY CHAIN MANAGEMENT INC
Name of Corporation

DOCUMENT NUMBER: P17000056410

The enclosed Articles of Correction and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

ALBERT CORRADA

Name of Contact Person

ALBERT CORRADA CPA

Firm/Company

2655 LEJEUNE ROAD #902

Address

CORAL GABLES, FL 33134

City/State and Zip Code

ACORRADA@CORRADACPA.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

ALBERT CORRADA at (305) 804-8569

Name of Contact Person

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

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| <input checked="" type="checkbox"/> \$35.00 Filing Fee | <input type="checkbox"/> \$43.75 Filing Fee & Certificate of Status |
| <input type="checkbox"/> \$43.75 Filing Fee & Certified Copy | <input type="checkbox"/> \$52.50 Filing Fee, Certificate of Status & Certified Copy |

Mailing Address:

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

Street Address:

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

ARTICLES OF CORRECTION

For

AROMED SUPPLY CHAIN MANAGEMENT INC

Name of Corporation as currently filed with the Florida Dept. of State

P17000056410

Document Number (if known)

Pursuant to the provisions of Section 607.0124 or 617.0124, Florida Statutes, this corporation files these Articles of Correction within 30 days of the file date of the document being corrected.

These articles of correction correct 06/26/2017
(Document Type Being Corrected)

filed with the Department of State on 06/29/2017
(File Date of Document)

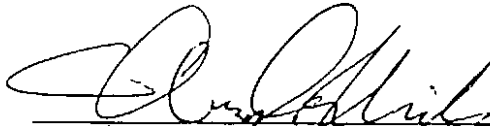
Specify the inaccuracy, incorrect statement, or defect:

INCOMPLETE NAME FOR THE PRESIDENT

Correct the inaccuracy, incorrect statement, or defect:

THE PRESIDENT'S FULL NAME IS:

CARLOS LUIS AROCHA MEDINA



(Signature of a director, president or other officer - if directors or officers have not been selected, by an incorporator - if in the hands of the receiver, trustee, or other court appointed fiduciary, by that fiduciary.)

CARLOS LUIS AROCHA MEDINA

(Typed or printed name of person signing)

PRESIDENT

(Title of person signing)

Filing Fee: \$35.00