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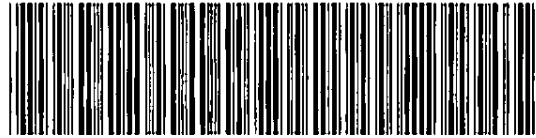
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- 10-14-2021-01027

COVER LETTER

Department of State  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

SUBJECT: Articles of Domestication for The Ears Have It, Inc.

Enclosed is an original and one (1) copy of the Articles of Domestication and a check:

FEES:

Certificate of Domestication	\$ 50.00
Articles of Incorporation and Certified Copy	\$ <u>78.75</u>
Total filing fee	\$128.75

OPTIONAL:

Certificate of Status	\$ 8.75
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From: Jeff Stoner

Name (printed or typed)  
1442 Shoreside Way, Suite 110, PMB 123

Address  
Winter Garden, Florida 34787

City, State & Zip  
910-398-4438

Daytime Telephone Number

jeff@mymickeyvacation.com

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

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TALLAHASSEE, FL  
JAN 14 2021

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Articles of Domestication  
Foreign Corporation Domesticating to Florida

The undersigned, Jeff Stoner Vice - President  
(Name) (Title)

of The Ears Have It, Inc. a foreign  
corporation, in accordance with s. 607.11922, Florida Statutes, submit these Articles of  
Domestication.

1. Then name of the domesticating corporation is The Ears Have It, Inc.  
(Foreign Corporation)

2. The jurisdiction and date of its formation is North Carolina, April 9, 2008

3. The name of the domesticated corporation is The Ears Have It, Inc.

4. The jurisdiction of formation of the domesticated corporation is **Florida**

5. The domestication corporation is a foreign corporation and the domestication was  
approved in accordance with its organic law.

6. Attached are Florida Articles of Incorporation to complete the domestication  
requirements pursuant to s.607.0202, F.S.

I certify I am authorized to sign these Articles of Domestication on behalf of the corporation.

  
(Authorized Signature)

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CLERK OF THE  
COURT  
JANUARY 4, 2021  
TALLAHASSEE, FLORIDA

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**ARTICLES OF INCORPORATION**  
*IN COMPLIANCE WITH CHAPTER 607, F.S.*

**ARTICLE I NAME**

THE NAME OF THE CORPORATION SHALL BE:

The Ears Have It, Inc.

**ARTICLE II PRINCIPAL OFFICE**

THE PRINCIPAL PLACE OF BUSINESS/MAILING ADDRESS IS:

Principal Address  
1442 Shoreside Way, Suite 110, PMB 123

Winter Garden, Florida 34787

Mailing Address  
9103 BRADLEIGH DRIVE

WINTER GARDEN FL 34787

**ARTICLE III PURPOSE**

THE PURPOSE FOR WHICH THE CORPORATION IS ORGANIZED:

To assist clients plan every aspect of a vacation, including, but not limited to, travel tickets, stay accommodations, and budgeting information.

**ARTICLE IV SHARES**

THE NUMBER OF SHARES OF STOCK IS: 1000

**ARTICLE VI REGISTERED AGENT AND STREET ADDRESS**

THE NAME AND FLORIDA STREET ADDRESS (P.O. BOX NOT ACCEPTABLE) OF THE REGISTERED AGENT IS:

Registered Agents Inc.

7901 4th Street N STE 300

St. Petersburg, FL 33702

HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I AM FAMILIAR WITH AND ACCEPT THE APPOINTMENT AS REGISTERED AGENT AND AGREE TO ACT IN THIS CAPACITY.

Bill Hume

Signature/Registered Agent

12/23/2020  
Date

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**ARTICLE V DIRECTORS AND/ OR OFFICERS**

*THE NAME(S) AND ADDRESS(ES) AND SPECIFIC TITLES:*

Name & Title: Jeff Stoner, Vice President

Address: 1442 Shoreside Way

Ste 110, PMB 123

Winter Garden, Florida 34787

Name & Title: \_\_\_\_\_

Address: \_\_\_\_\_

Name & Title: \_\_\_\_\_

Address: \_\_\_\_\_

Name & Title: \_\_\_\_\_

Address: \_\_\_\_\_

Name & Title: Karen Stoner, President

Address: 1442 Shoreside Way

Ste 110, PMB 123

Winter Garden, Florida 34787

Name & Title: \_\_\_\_\_

Address: \_\_\_\_\_

Name & Title: \_\_\_\_\_

Address: \_\_\_\_\_

Name & Title: \_\_\_\_\_

Address: \_\_\_\_\_

I submit this document and affirm that the facts stated herein are true. I am aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155.F.S.

  
Signature/Authorized Person

12/23/20  
Date

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