

# APPLICATION FOR REGISTRATION OF FICTITIOUS NAME

REGISTRATION# G24000141272

**Fictitious Name to be Registered:** ASSOCIATES AT WORK INC.

**Mailing Address of Business:** 9025 FLORIBUNDA DRIVE  
ORLANDO, FL 32818

**Florida County of Principal Place of Business:** MULTIPLE

**FEI Number:**

**FILED**  
**Nov 19, 2024**  
**Secretary of State**

**Owner(s) of Fictitious Name:**

INSPIREDCARE ACADEMY LLC  
9025 FLORIBUNDA DRIVE  
ORLANDO, FL 32818  
Florida Document Number: L23000441348  
FEI Number: 93-3548213

SPENCER, ANDREA  
9025 FLORIBUNDA DRIVE  
ORLANDO, FL 32818

FANDINO, MANUEL  
9025 FLORIBUNDA DRIVE  
ORLANDO, FL 32818

I the undersigned, being an owner in the above fictitious name, certify that the information indicated on this form is true and accurate. I further certify that the fictitious name to be registered has been advertised at least once in a newspaper as defined in Chapter 50, Florida Statutes, in the county where the principal place of business is located. I understand that the electronic signature below shall have the same legal effect as if made under oath and 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, Florida Statutes.

ANDREA SPENCER

11/19/2024

Electronic Signature(s)

Date

**Certificate of Status Requested ( )**

**Certified Copy Requested ( )**