

2022 FLORIDA NOT FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N20000006196

Entity Name: INTERNATIONAL FACTORING ASSOCIATION, SOUTHEAST
CHAPTER, INC.**FILED**
Jul 21, 2022
Secretary of State
1846565756CR**Current Principal Place of Business:**2385 NW EXECUTIVE CENTER DRIVE
SUITE 100 C/O GMKPA
BOCA RATON, FL 33431**Current Mailing Address:**2385 NW EXECUTIVE CENTER DRIVE
SUITE 100 C/O GMKPA
BOCA RATON, FL 33431 US**FEI Number: 85-1486556****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**GARY M. KRASNA, P.A.
2385 NW EXECUTIVE CENTER DRIVE
SUITE 100
BOCA RATON, FL 33431 US*The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.***SIGNATURE:** GARY M. KRASNA, PRESIDENT

07/21/2022

Electronic Signature of Registered Agent

Date

Officer/Director Detail :**Title** CHAIRMAN, DIRECTOR
Name ALBANESE, DENISE
Address 6773 DEL MAR TERRACE
City-State-Zip: NAPLES FL 34105**Title** SECRETARY, DIRECTOR
Name WEITZMAN, JESSICA
Address C/O JSW FINANCE SOLUTIONS LLC
20110 BOCA WEST DRIVE SUITE 258
City-State-Zip: BOCA RATON FL 33434**Title** VP, DIRECTOR
Name SEREK, DONALD
Address 6604 N. OCEAN BLVD
City-State-Zip: MYRTLE BEACH SC 29572**Title** VP, DIRECTOR
Name FRIEDMAN, HARVEY
Address 475 WESTHAMPTON
City-State-Zip: WILLIAMSBURG VA 23188**Title** PRESIDENT, DIRECTOR
Name KRASNA, GARY M
Address 2385 NW EXECUTIVE CENTER DRIVE
SUITE 100 C/O GMKPA
City-State-Zip: BOCA RATON FL 33431**Title** TREASURER, DIRECTOR
Name COHEN, MAX
Address 90 GROVE STREET
SUITE 206
City-State-Zip: RIDGEFIELD CT 06877**Title** VP, DIRECTOR
Name KODINSKY, MICHAEL
Address 3101 COBB PARKWAY SE
SUITE 124
City-State-Zip: ATLANTA GA 30339**Title** DIRECTOR
Name LONES, LEIGH
Address 3379 PEACHTREE ROAD
SUITE 330
City-State-Zip: ATLANTA GA 30326**Continues on page 2**

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: GARY M KRASNA

PRESIDENT

07/21/2022

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name COLLINS, CHRIS
Address 315 E. ROBINSON STREET
 SUITE 200
City-State-Zip: ORLANDO FL 32801

Title DIRECTOR
Name MCGEE, ANDREW
Address 5665 NEW NORTHSIDE DRIVE
City-State-Zip: ATLANTA GA 30328