

**2019 FOREIGN LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT**

DOCUMENT# M04000004674

**Entity Name:** ARBOR E&T, LLC

**Current Principal Place of Business:**

805 N WHITTINGTON PARKWAY  
SUITE 400  
LOUISVILLE, KY 40222

**Current Mailing Address:**

805 N. WHITTINGTON PARKWAY  
SUITE 400  
LOUISVILLE, KY 40222 US

**FEI Number:** 46-0508470

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 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:** \_\_\_\_\_

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title           MANAGER & PRESIDENT  
Name           DOUGLASS, EDWARD M  
Address        805 N WHITTINGTON PARKWAY  
                  SUITE 400  
City-State-Zip: LOUISVILLE KY 40222

Title           MGR, VP  
Name           WILLIAMS, LOUIS BRADLEY  
Address        805 N WHITTINGTON PARKWAY  
                  SUITE 400  
City-State-Zip: LOUISVILLE KY 40222

Title           MANAGER & VP  
Name           VU, MICHAEL  
Address        805 N WHITTINGTON PARKWAY  
                  SUITE 400  
City-State-Zip: LOUISVILLE KY 40222

Title           MANAGER & VP  
Name           GIORDANO, DEBRA  
Address        805 N WHITTINGTON PARKWAY  
                  SUITE 400  
City-State-Zip: LOUISVILLE KY 40222

*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 a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** EDWARD M. DOUGLASS

**PRESIDENT**

**06/12/2019**

Electronic Signature of Signing Authorized Person(s) Detail

Date