



NOLAND HEALTH
SERVICES, INC.

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STATE HEALTH PLANNING
AND DEVELOPMENT AGENCY

VIA FEDERAL EXPRESS AND
EMAIL shpda.online@shpda.alabama.gov

April 19, 2016

Mr. Alva Lambert
Executive Director
State Health Planning and Development Agency
100 North Union Street, Suite 870
Montgomery, AL 36106

RE: Change of Ownership (CHOW) – Allen Memorial Home - Mobile
County

Dear Mr. Lambert:

The purpose of this letter is to inform your office that Noland Management Services, LLC¹ (Noland) subject to the completion and receipt of applicable regulatory approvals will finalize an asset purchase agreement (“APA”) for the acquisition of Allen Memorial Home. The effective date of the CHOW will be dependent upon the receipt of the necessary regulatory approvals but is expected to be on or about June 1, 2016.

Allen Memorial Home is a 119 bed nursing home and is located at 735 South Washington Avenue, Mobile, AL 36603. Noland will acquire the facility pursuant to the APA. The current owner and operator of the facility is Allen Memorial Home.

Enclosed you will find:

- A Change of Ownership Application executed by both parties.
- A filing fee of \$2,500.

Please return one (1) date stamped copy of this filing using the enclosed envelope.

¹ Noland Health Services, Inc. is the sole member and manager of Noland Management Services, LLC.

If you need additional information or have any questions, please contact me at (205) 783-8444. Thank you in advance for your assistance.

Sincerely,

Barbara Estep

Barbara Estep
Director, Regulatory Affairs

cc: Allen Memorial Home
c/o Michele C. Manry
Treasurer
356 Government Street
Mobile, AL 36602

F. Grey Redditt, Jr. and
Bryan A. Thames
Maynard Cooper Gale
11 North Water Street
RSA Battle House Tower, Suite 27000
Mobile, AL 36602

Gary Goff
Noland Health Services, Inc.
600 Corporate Parkway, Suite 100
Birmingham, AL 35242

Carol Knight
Noland Health Services, Inc.
600 Corporate Parkway, Suite 100
Birmingham, AL 35242

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CHANGE OF OWNERSHIP

APR 20 2016

STATE HEALTH PLANNING AND DEVELOPMENT AGENCY

Part I: Purchasing Organization Information

Name of Organization: _Noland Management Services, LLC_

Facility Name: (ADPH Licensure name) _Allen Memorial Home_

SHPDA ID Number: _097-N0002_

Address (PO Box #): _735 South Washington Avenue_

City, State, Zip, County: _Mobile, AL 36603 Mobile_

Number/Type Licensed Beds: _119 Nursing Home Beds_

Owner(s): _Noland Management Services, LLC (Noland Health Services, Inc. is the sole member and manager of Noland Management Services, LLC)

Operator(s): _Same as owner_

Part II: Selling Organization Information

Name of Organization: _Allen Memorial Home

Address (PO Box #): _735 S. Washington Avenue_

City, State, Zip, County: _Mobile, AL 36602 Mobile County_

Number/Type Licensed Beds: _119 Nursing Home Beds_

Owner(s): _Allen Memorial Home_

Operator(s): _Same_

Part III: Value of Consideration

Monetary Value of Purchase: \$available upon request No./Type Beds: 119 Nursing Home Beds

Terms of Purchase: _Asset Purchase_ (add more pages as necessary to describe the sale)

Part IV: List of Certificate of Need AuthorityNumber of Beds: 119Types of Institutional Health Services: Nursing Home BedsList Service Area by County for Home Health Agencies: N/A**On an Attached Sheet Please Address the Following: See Attached**

- *1.) The financial scope of the project to include the preliminary estimate of costs broken down by equipment, construction, and yearly operating costs.
- *2.) The services to be offered by the proposal (the applicant will state whether he has previously offered the service and whether the service is an extension of a presently offered service, or whether the service is a new service).
- *3.) Whether the proposal will include the addition of any new beds.
- *4.) Whether the proposal will involve the conversion of beds.
- *5.) Whether the assets and stock (if any) will be acquired.

Part V: Certification of Information

I certify that I agree to provide the information necessary (financial, utilization of services and beds, etc.) so the new owner can have the necessary information to complete reports as necessary for the entire fiscal year. The purchaser has agreed to these terms,

Seller(s) Signature(s):
 Owner(s): Thomas V Rode Allen Memorial Home
 Operator(s): _____
 Title/Date: President April 1, 2016

I certify that I will be responsible for retaining records as necessary to complete reports required for the entire fiscal year, and agree to these terms. I have enclosed a check in the amount of **\$2,500** made payable to 'Alabama State Health Planning and Development Agency' to cover the cost of the change of ownership.

YES NO The above Purchaser and Seller have agreed to these purchase terms.

Purchaser Signature: _____

Title/Date: President/CEO _____
 Date

Noland Management Services, LLC
Attachment to Change of Ownership Application
Facility to be Acquired: Allen Memorial Home
SHPDA ID: 097-N0002

***1.) The financial scope of the project to include the preliminary estimate of costs broken down by equipment, construction, and yearly operating costs.**

The Asset Purchase is for Allen Memorial Home (119 nursing home beds), and the transaction will encompass a fair market value exchange of consideration between Allen Memorial Home and Noland Health Services, Inc. There will be no construction. Existing equipment will be acquired through the asset purchase.

***2.) The services to be offered by the proposal (the applicant will state whether he has previously offered the service and whether the service is an extension of a presently offered service, or whether the service is a new service).**

Nursing Home (SNF) services will continue to be offered; therefore, this is not a new service. Noland Health Services, Inc., the sole member and manager of Noland Management Services, LLC, is a nursing home provider and operates a number of SNF facilities throughout Alabama.

***3.) Whether the proposal will include the addition of any new beds.**

The proposed acquisition does not involve the addition of any new beds.

***4.) Whether the proposal will involve the conversion of beds.**

There will be no conversion of beds as a result of the proposed acquisition

***5.) Whether the assets and stock (if any) will be acquired.**

The proposed transaction is an asset purchase. The transaction does not involve any stock.