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Apr 08 2024

STATE HEALTH PLANNING AND
DEVELOPMENT AGENCY

Lelftonya Mckee
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Collinsville, Al 35961
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CO2024-009

SHPDA

Email: shpda.online@sphda.alabama.gov

To whom it may concern,

I currently own / operate a 16 bed Assisted Living Facility in Fyffe, Alabama. I purchased Morning Glory Meadows in October of 2021. It has been a very rewarding and successful journey.

I have an opportunity to purchase Rosewood Manor in Scottsboro, Al. This purchase will add 16 ALF beds to my business as well as 16 SCALF beds. I plan to utilize the two properties as one company to continue to provide great care for a diversity of needs for my residents.

Attached is the application for the change of ownership/control for the CON already in place at Rosewood Manor Specialty Care. I have divided the purchase amount of the entire project by the number of total beds then multiplied the number of SCALF beds to get the Monetary Value of the purchase. (Part IV) The purchase of the entire project will differ because of it being and ALF/SCALF purchase.

We plan to close on this project May 31 2024 and I will take Authority on June 1 2024. Please let me know if you have any questions regarding the application or purchase.

I appreciate your time and hope to hear from you soon.

Warm regards,


Lelftonya Mckee RN / Administrator
Morning Glory Meadows
2055 Main Street
Fyffe, Al. 35971

NOTICE OF CHANGE OF OWNERSHIP/CONTROL

The following notification of intent is provided pursuant to all applicable provisions of ALA. CODE § 22-21-270 (1975 as amended) and ALA. ADMIN. CODE r. 410-1-7-.04. This notice must be filed at least twenty (20) days prior to the transaction.

Change in Direct Ownership or Control (of a vested Facility; ALA. CODE §§ 22-20-271(d), (e))

Change in Certificate of Need Holder (ALA. CODE § 22-20-271(f))

Change in Facility Management (Facility Operator)

Any transaction other than those above-described requires an application for a Certificate of Need.

Part I: Facility Information

SHPDA ID Number: 071-S3604
(This can be found at www.shpda.alabama.gov, Health Care Data, ID Codes)

Name of Facility/Provider: Rosewood Manor Specialty Care
(ADPH Licensure Name)

Physical Address: 1513 County Park Road
Scottsboro, Al 35769

County of Location: JACKSON

Number of Beds/ESRD Stations: 16

CON Authorized Service Area (Home Health and Hospice Providers Only). Attach additional pages if necessary. _____

Part II: Current Authority *(Note: If this transaction will result in a change in direct ownership or control, as defined under ALA. CODE § 22-20-271(e), please attach organizational charts outlining current and proposed structures.)*

Owner (Entity Name) of Facility named in Part I: Veritas InCare, LLC

Mailing Address: 6858 Swinnea Road Bldg 2
Southaven, MS 38671

Operator (Entity Name): Veritas InCare, LLC

Part III: Acquiring Entity Information

Name of Entity: Rosewood Manor Management, LLC

Mailing Address: 12001 US HWY 11
Collinsville, Al 35961

Operator (Entity Name): Rosewood Manor Management LLC

Proposed Date of Transaction is on or after: 5/31/2024

Part IV: Terms of Purchase

Monetary Value of Purchase: \$ 1080000.00

Type of Beds: Specialty Care Assisted Living

Number of Beds/ESRD Stations: 16

Financial Scope: to Include Preliminary Estimate of the Cost Broken Down by Equipment, Construction, and Yearly Operating Cost:

Projected Equipment Cost: \$ 0

Projected Construction Cost: \$ 0

Projected Yearly Operating Cost: \$ 1118246.00

Projected Total Cost: \$ 1118246

On an Attached Sheet Please Address the Following:

- 1.) The services to be offered by the proposal (the applicant will state whether he has previously offered the service, whether the service is an extension of a presently offered service, or whether the service is a new service).
- 2.) Whether the proposal will include the addition of any new beds.
- 3.) Whether the proposal will involve the conversion of beds.
- 4.) Whether the assets and stock (if any) will be acquired.

Part V: Certification of Information

Current Authority Signature(s):

The information contained in this notification is true and correct to the best of my knowledge and belief.

Owner(s): [Signature]

Operator(s): [Signature]

Title/Date: Sole Member 4/4/24



SWORN to and subscribed before me, this 4 day of April, 2024.

Carol Prestridge
Notary Public

My Commission Expires: Aug. 1, 2025

Acquiring Authority Signature(s):

I agree to be responsible for reporting of all services provided during the current annual reporting period, as specified in ALA. ADMIN. CODE r. 410-1-3-.12. The information contained in this notification is true and correct to the best of my knowledge and belief.

Purchaser(s): _____

Operator(s): _____

Title/Date: _____

SWORN to and subscribed before me, this _____ day of _____, _____.

(Seal)

Notary Public

My Commission Expires: _____

Author: Alva M. Lambert

Statutory Authority: § 22-21-271(c), Code of Alabama, 1975

History: New Rule

SWORN to and subscribed before me, this _____ day of _____, _____.

(Seal)

Notary Public

My Commission Expires: _____

Acquiring Authority Signature(s):

I agree to be responsible for reporting of all services provided during the current annual reporting period, as specified in ALA. ADMIN. CODE r. 410-1-3-.12. The information contained in this notification is true and correct to the best of my knowledge and belief.

Purchaser(s): Seltone meka [Signature]

Operator(s): Seltone meka [Signature]

Title/Date: owner / 4/2/24 owner / 4/2/24

SWORN to and subscribed before me, this 2 day of April, 2024.

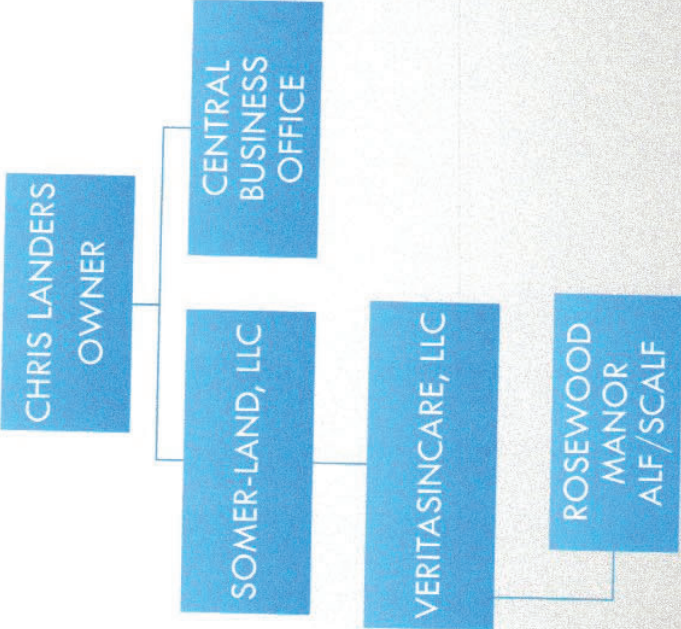
(Seal)

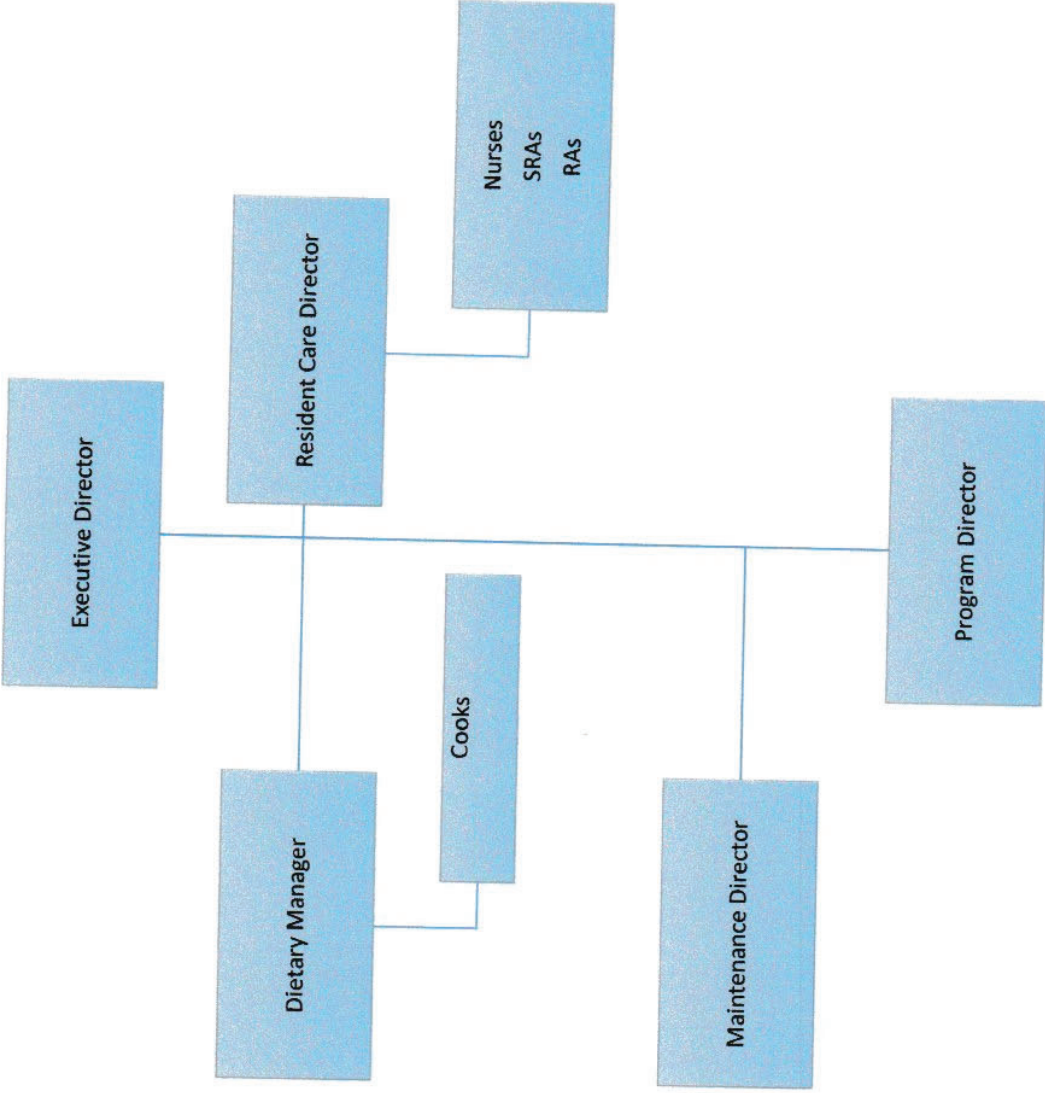
[Signature]
Notary Public

My Commission Expires: 11/15/2025

Author: Alva M. Lambert
Statutory Authority: § 22-21-271(c), Code of Alabama, 1975
History: New Rule

ROSEWOOD MANOR ORGANIZATION CHART





NOTICE OF CHANGE OF OWNERSHIP/ CONTROL

Part IV: Terms of Purchase- Address the Following

1. Services to be offered by the proposal.
I plan to extend my current business as an Assisted Living owner to include Specialty Care Assisted Living. With this purchase I will acquire 16 additional Assisted Living beds and 16 Specialty Care Assisted Living beds.
2. No new beds will be added.
3. No bed conversion will be performed.
4. All assets of the SCALF will be acquired. Stock is not applicable.

Proposed Rosewood Manor Organizational Chart

