

CO2024-015
RECEIVED
May 06 2024
STATE HEALTH PLANNING AND
DEVELOPMENT AGENCY

May 6, 2024

Emily T. Marsal, Executive Director Alabama State Health Planning & Development Agency 100 N. Union St. Ste. 870 Selma, AL 36104

Re: Notice of Change of Ownership/Control

SHPDA ID: 047-N0006

Arabella Health & Wellness of Selma

Dear Ms. Marsal:

Please find enclosed the Notice of Change of Ownership/Control form for Arabella Health & Wellness of Selma, a 172-bed skilled nursing facility located in Selma, Alabama. This notice is being sent to correct information previously submitted and to update indirect ownership information for **Arabella Health & Wellness of Selma PropCo LLC** (real property owner/CON holder).

On 8/1/23, after the SHPDA change of ownership acknowledgement letter was issued but prior to the consummation of the transaction on 8/25/23, <u>Arabella AL 600 PropCo LP</u> became the 100% member of **Arabella Health & Wellness of Selma PropCo LLC.** Organizational charts describing the ownership structure as previously reported to the Agency (Attachment 1) and as actually effective on 8/25/23 are enclosed (Attachment 2).

Additionally, on 6/9/23, after the SHPDA change of ownership acknowledgement letter was issued but prior to the consummation of the transaction on 8/25/23, Arabella AL 600 OpCo LP became the 100% member of Arabella Health & Wellness of Selma OpCo LLC (facility operator/licensee). Organizational charts describing the ownership structure as previously reported to the Agency (Attachment 3) and as actually effective on 8/25/23 are enclosed (Attachment 4). The organizational structure effective on 6/9/23 was reported to the Alabama Department of Public Health prior to receiving licensing approval on 8/25/23.

We are providing this information to the Agency so that the provider's information on file will be current and accurate. Please note, the provider is not proposing a change from the legal entities currently on file but is proposing changes to the <u>indirect</u> ownership of the <u>current</u> and <u>approved</u> real property owner/CON holder and facility operator/licensee.

The change of ownership application fee was paid online on May 3, 2024 and a copy of the receipt is enclosed.

If you have any questions or need additional information, please contact me at (478) 396-4777 or blamberth@newlegacypro.com.

Sincerely,

Brandie P. Lamberth, CPA

President, New Legacy Professional Services

Brandie P. Lamberth

**Enclosures** 

State Health Planning and Development Agency

Alabama CON Rules & Regulations

### 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.

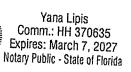
or. This house must be filed at let	ast therity (20) days prior to the dansaction.				
Change in Direct Ownership or Control (of a vested Facility; ALA. CODE §§ 22-20-271(d), (e)) Change in Certificate of Need Holder (ALA. CODE § 22-20-271(f)) Change in Facility Management (Facility Operator) Any transaction other than those above-described requires an application for a Certificate of Need.					
Part I: Facility Information					
SHPDA ID Number: (This can be found at <u>www.shpda.alabama.gov</u> , He	047-N0006 saith Care Data, ID Codes)				
Name of Facility/Provider: (ADPH Licensure Name)	Arabella Health & Wellness of Selma				
Physical Address:	11 Bell Rd				
	Selma, AL 36701				
County of Location:	Dallas				
Number of Beds/ESRD Stations:	172				
CON Authorized Service Area (Home Health and Hospice Providers Only). Attach additional lages if necessary.  N/A					
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:	Arabella Health & Wellness of Selma PropCo LLC				
Mailing Address:	11 Bell Rd				
	Selma, AL 36701				
Operator (Entity Name):	Arabella Health & Wellness of Selma OpCo LLC				
Part III: Acquiring Entity Inform	ation				
Name of Entity:	Arabella Health & Wellness of Selma PropCo LLC				
Mailing Address:	3440 Hollywood Blvd, Ste. 415				
	Hollywood, FL 33021				

Stale Health Planni	ng and Development Agency				Alabama CON Rules & Regulations
Operator (Entity	Name):	_A	rabella He	alth & We	ellness of Selma OpCo LLC
Proposed Date on or after:	of Transaction is		03/04/202	24	
Part IV: Tern	ns of Purchase				
Monetary Value	of Purchase:	\$_	N/A		
Type of Beds:		-	Skilled Nu	irsing Fac	cility Beds
Number of Beds	E/ESRD Stations:		172	**************************************	
Financial Scop Construction, ar	pe: to Include Prelimina and Yearly Operating Cost	ary l:	Estimate of	the Cost	Broken Down by Equipment,
Projected	Equipment Cost:	\$_	40 times as as as the 40 as as as as		
Projected	Construction Cost:	\$_	*************	******	
Projected	Yearly Operating Cost:	\$_	<b>******</b>		
Projected	Total Cost:	\$_	-		
1.) The services	hed Sheet Please A	opo	sal (the appl	icant will st	tate 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	cor	nversion of b	eds.	
4.) Whether the assets and stock (if any) will be acquired.					
Part V: Certi	fication of Informat	ion	1		
<b>Current Author</b>	ity Signature(s):				
The information belief.	contained in this notifica	tion	is true and	correct to th	ne best of my knowledge and
Owner(s):	Adam Sasounes	ss		XX	8
Operator(s):	Chaim N. Hertz	el		<u>×</u>	
Title/Date:	Authorized Signator	Ŋ		x	

Title/Date:

State Health Plannin	g and Development Agency	Alabama CON Rules & Regulations			
SWORN to and	subscribed before me, this <u>3</u> day o	of /May 26245.			
(Seal)	Yana Lipis Comm.: HH 370635 Expires: March 7, 2027 Notary Public - State of Florida	My Commission Expires: 3/7/2027			
Acquiring Auth	ority 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. 410-1-312. The information contained in this notification is true and correct to the best of my knowledge and belief.					
Purchaser(s):	Adam Sasouness	×			
Operator(s):	Chaim N. Hertzel	×			
Title/Date:	Authorized Signatory	<u>x</u>			
SWORN to and :	subscribed before me, this <u>3</u> day o	May 2024			

(Seal)



Notary Public

My Commission Expires: 3/7/2027

Author: Alva M. Lambert

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

History: New Rule

State Health Plann	ing and Development Agency	Alabama CON Rules & Regulations			
4 V V V V Z 2 V		ay of May Just			
(Seal)	TAMALA S BRIGGINS Notary Public Alabama State at Large	My Commission Expires: 5. 22.7			
Acquiring Authority Signature(s):					
period, as spe	ISPONSIBLE for reporting of all Services cified in ALA. ADMIN. CODE r. 410- LIE and correct to the best of my know	s provided during the current annual reporting 1-312. The information contained in this viedge and belief.			
Purchaser(s):	Adam Sasouness				
Operator(s):	Chaim N. Hertzel	× CATONT			
Title/Date:	Authorized Signatory	x			
SWORN to and	subscribed before me, this 2 da	ayor May Josef			
(Seal)		Herry S.Br			
(ocal)		Notary Public My Commission Expires: <u></u> <u> </u>			

TAMALA S BRIGGINS Notary Public Alabama State at Large

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

### Alabama State Health Planning & Development Agency

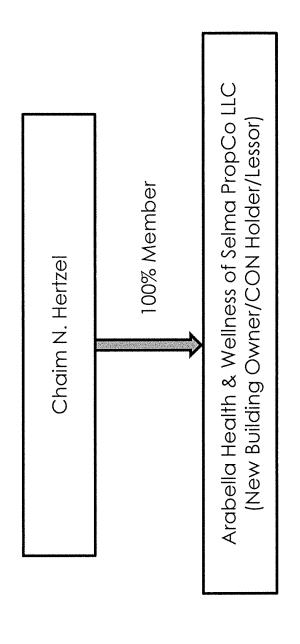
### NOTICE OF CHANGE OF OWNERSHIP/CONTROL

### Part IV: Terms of Purchase - Attachment

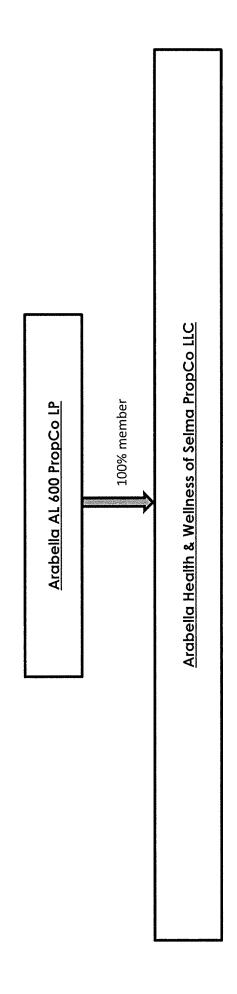
- 1. There will be no change to the services currently provided by the facility, which are skilled nursing care services.
- 2. There will be no addition of beds.
- 3. There will be no conversion of beds.
- 4. The transaction is a transfer of indirect ownership interest in Arabella Health & Wellness of Selma PropCo LLC, the current real property owner and Certificate of Need holder. The transfer of membership interest occurred on March 4, 2024.

<u>Note:</u> This notice is being submitted to correct and update the information on file with SHPDA in order to ensure that the information is current and accurate. There is no change in the entities that are the current licensee/lessee or property owner/lessor/CON holder. The proposed change will only be an indirect change to the property owner entity's parent organizational structure.

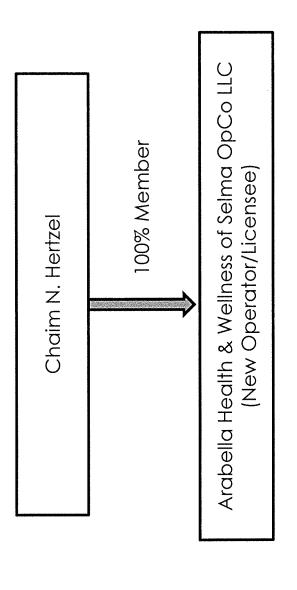
# Organizational Chart as submitted to SHPDA on 4/26/23 Arabella Health & Wellness of Selma PropCo LLC



## Arabella Health & Wellness of Selma PropCo LLC Organizational Chart effective 8/25/23



## Organizational Chart as submitted to SHPDA on 4/26/23 Arabella Health & Wellness of Selma OpCo LLC d/b/a Arabella Health & Wellness of Selma



### Attachment 4

Arabella Health & Wellness of Selma OpCo LLC d/b/a Arabella Health & Wellness of Selma Organizational Chart effective 6/9/23 (CHOW transaction occurred 8/25/23)

