

January 2, 2026



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

**RE: Notice of Change of Ownership/Control**

**CHOW effective date: January 20, 2026**

**SHPDA ID Number: 075-N0002**

**SouthCare Health and Rehab of Vernon, LLC**

Dear Ms. Marsal:

Please find enclosed the Notice of Change of Ownership/Control form for SouthCare Health and Rehab of Vernon, a 90-bed skilled nursing facility located in Vernon, Alabama. This notice proposes the change of ownership of the facility from Lamar Convalescent Center, Inc. (real property seller) to **Arabella Health & Wellness of Vernon Propco LLC** (proposed CON Holder, real property buyer and new lessor) and the transfer of operational control from SouthCare Health and Rehab of Vernon, LLC (outgoing operator/licensee) to **Arabella Health & Wellness of Vernon Opco LLC** (proposed facility operator/licensee and new lessee). The details of this transaction are outlined in the Purchase and Sale Agreement and Operations Transfer Agreement which will be provided upon request.

Upon approval of the change of ownership by the Alabama Department of Public Health and evidenced by the issuance of a new Nursing Home License, the contemplated transaction will become effective on or after January 20, 2026 (Commencement Date). Arabella Health & Wellness of Vernon Propco LLC (CON authority holder/lessor) and Arabella Health & Wellness of Vernon Opco LLC (lessee) will enter into a new lease agreement that will be effective on the Commencement Date.

The change of ownership application fee was paid online on December 31, 2025, REF ID: 143022802.

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

Sincerely,

*Brandie P. Lamberth*

Brandie P. Lamberth, CPA  
President, New Legacy Professional Services

Enclosures

## 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:	075-N0002
(This can be found at <a href="http://www.shpda.alabama.gov">www.shpda.alabama.gov</a> , Health Care Data, ID Codes)	
Name of Facility/Provider: (ADPH Licensure Name)	SouthCare Health and Rehab of Vernon, LLC
Physical Address:	1050 Convalescent Rd
	Vernon, AL 35592
County of Location:	LAMAR
Number of Beds/ESRD Stations:	158
CON Authorized Service Area (Home Health and Hospice Providers Only). Attach additional pages 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:	Lamar Convalescent Center, Inc.
Mailing Address:	1050 Convalescent Rd
	Vernon, AL 35592
Operator (Entity Name):	SouthCare Health and Rehab of Vernon, LLC

### Part III: Acquiring Entity Information

Name of Entity:	Arabella Health & Wellness of Vernon Propco LLC
Mailing Address:	1050 Convalescent Rd
	Vernon, AL 35592



SWORN to and subscribed before me this 31st day of(Seal) Mary Alison Armstrong  
Expires 7/31/2029

31st December 2026

Mary Alison Armstrong  
Notary PublicMy Commission Expires: 07/31/29

## 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): Arabella Health & Wellness of Vernon Propco LLC✓ Chaim N. Hertz  
✓ 12/31/25Operator(s): Arabella Health & Wellness of Vernon Opco LLC✓ Chaim N. Hertz  
✓ 12/31/25Title/Date: Chaim N. Hertz, Authorized SignatoryDate 12/31/25SWORN to and subscribed before me, this 31st day of December 2026

(Seal)

Mary Alison Armstrong  
Notary PublicMy Commission Expires: 07/31/29

Author: Alva M. Lambert

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

History: New Rule

Alabama State Health Planning & Development Agency

NOTICE OF CHANGE OF OWNERSHIP/CONTROL

Part IV: Terms of Purchase - Attachment

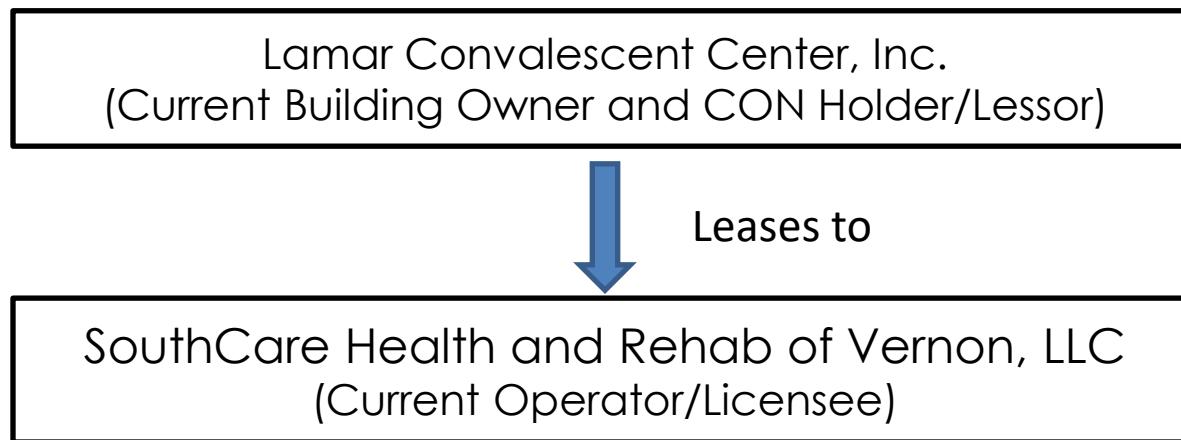
1. The services provided will be skilled nursing care as offered by the previous operator.
2. There will be no new beds added.
3. There will be no conversion of beds.
4. The proposed transaction will be a sale of assets (real property, personal property, equipment, and operational control). The operations will be transferred from SouthCare Health and Rehab of Vernon, LLC to Arabella Health & Wellness of Vernon Opco LLC. The real estate will be transferred from Lamar Convalescent Center, Inc. to Arabella Health & Wellness of Vernon Propco LLC. There will be a new lease agreement executed between Arabella Health & Wellness of Vernon Opco LLC and Arabella Health & Wellness of Vernon Propco LLC once the sale has occurred.

Note:

The projected yearly operating costs of \$12,500,000 represent amounts which are consistent with current facility operating costs and no substantial increases are expected.

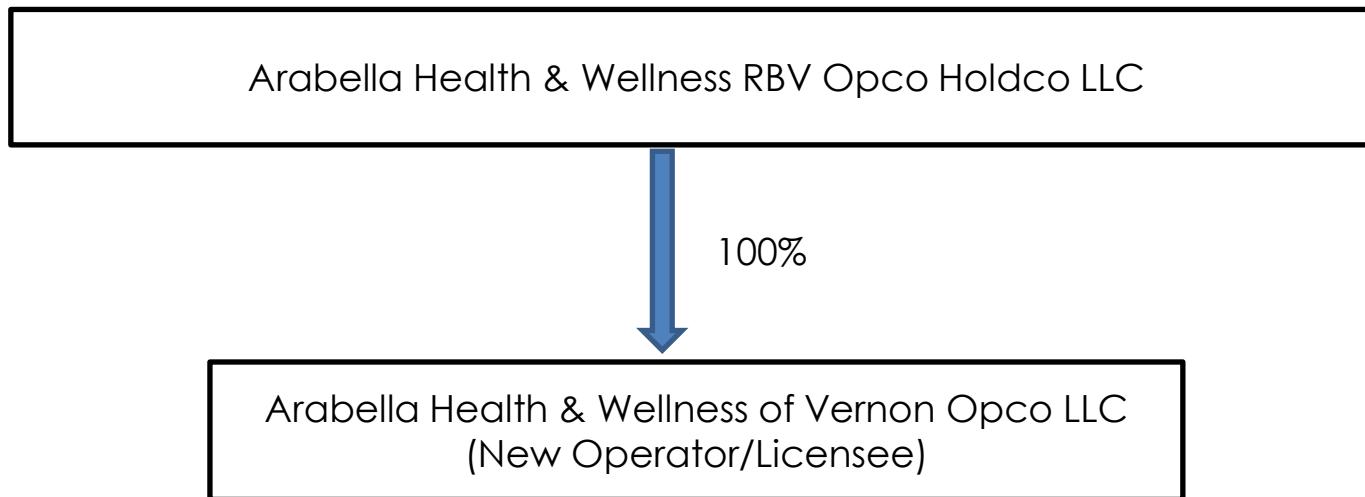
## Part II: Current Authority

### **SouthCare Health and Rehab of Vernon, LLC**



## Part III: Acquiring Entity Information

### **Arabella Health & Wellness of Vernon**



## Part III: Acquiring Entity Information

### **Arabella Health & Wellness of Vernon**

