



CO2026-033  
**RECEIVED**  
**Jan 02 2026**  
STATE HEALTH PLANNING AND  
DEVELOPMENT AGENCY

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, 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 [www.shpda.alabama.gov](http://www.shpda.alabama.gov), Health Care Data, ID Codes)

Name of Facility/Provider: SouthCare Health and Rehab of Vernon, LLC  
(ADPH Licensure Name)

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

State Health Planning and Development Agency

Alabama CON Rules &amp; Regulations

Operator (Entity Name): Arabella Health & Wellness of Vernon Opco LLC

Proposed Date of Transaction is  
on or after: January 20, 2026

**Part IV: Terms of Purchase**

Monetary Value of Purchase: \$ [REDACTED]

Type of Beds: Skilled Nursing Facility beds

Number of Beds/ESRD Stations: 158

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

Projected Equipment Cost: \$ -

Projected Construction Cost: \$ -

Projected Yearly Operating Cost: \$ 12,500,000

Projected Total Cost: \$ 12,500,000

**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): Lamar Convalescent Center, Inc.

Operator(s): SouthCare Health and Rehab of Vernon, LLC

Title/Date: Carole Townsend, President

✓ Carole J. Townsend

✓ Carole J. Townsend

Date 12-31-25

\* SWORN to and subscribed before me this

31<sup>st</sup> day of December 2025

(Seal)

Mary Alison Armstrong  
Notary Public

My 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 &amp; Wellness of Vernon Propco LLC ✓

Operator(s): Arabella Health &amp; Wellness of Vernon Opco LLC ✓

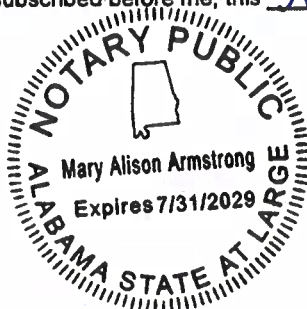
Title/Date: Chaim N. Hertz, Authorized Signatory

Date 12/31/25

SWORN to and subscribed before me, this

31<sup>st</sup> day of December 2025

\* (Seal)

Mary Alison Armstrong  
Notary Public

My 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.

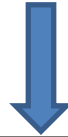
Note:

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**

Lamar Convalescent Center, Inc.  
(Current Building Owner and CON Holder/Lessor)

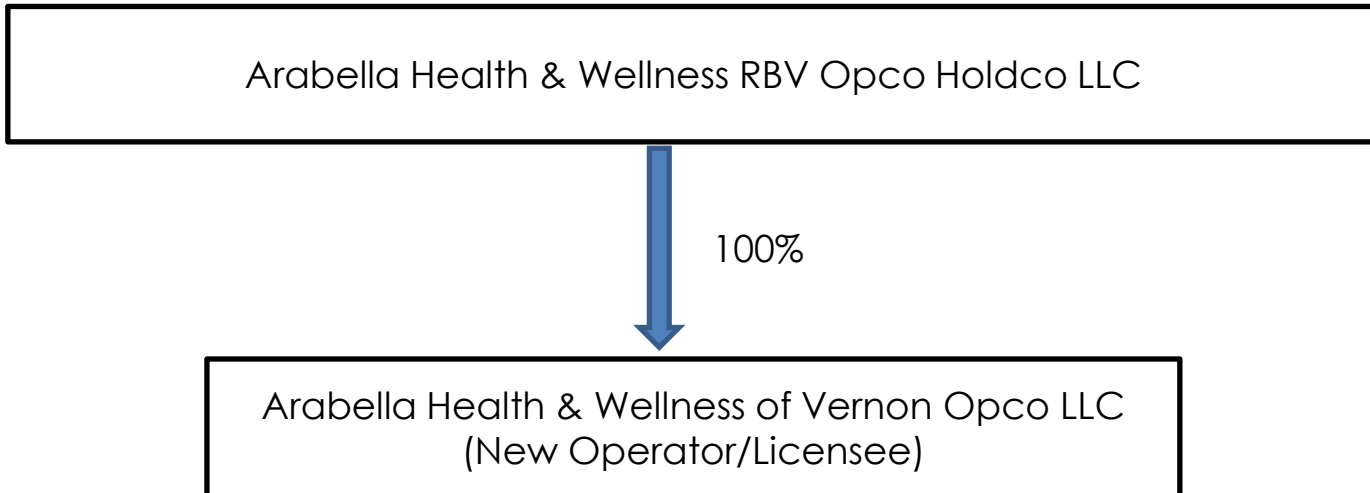


Leases to

SouthCare Health and Rehab of Vernon, LLC  
(Current Operator/Licensee)

## Part III: Acquiring Entity Information

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



## Part III: Acquiring Entity Information

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

