SEP 20 2019
STATE HEALTH PLANNING AND DEVELOPMENT AGENCY

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.

X Change in Certificate of Need Hol X Change in Facility Management (I	ontrol (of a vested Facility; ALA. CODE §§ 22-20-271(d), (e)) der (ALA. CODE § 22-20-271(f)) Facility Operator) e-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> ,	mber: 047 - N0006 d at www.shpda.alabama.gov, Health Care Data, ID Codes)		
Name of Facility/Provider: (ADPH Licensure Name)	Blue Ridge Healthcare Selma		
Physical Address:	11 Bell Road		
	Selma, AL 36701		
County of Location:	Dallas		
Number of Beds/ESRD Stations:	172 - certified skilled nursing		
CON Authorized Service Area (Home pages if necessaryN/A	Health and Hospice Providers Only). Attach additional		
Part II: Current Authority (Nownership or control, as defined und charts outlining current and proposed	ote: If this transaction will result in a change in direct er ALA. CODE § 22-20-271(e), please attach organizational structures.)		
Owner (Entity Name) of Facility named in Part I:	Selma AL SNF Realty LLC		
Mailing Address:	11 Bell Road		
-	Selma, AL 36701		
Operator (Entity Name):	Blue Ridge Healthcare Selma LLC		
Part III: Acquiring Entity Infor	mation		
Name of Entity:	11 Bell LLC		
Mailing Address:	11 Bell Road		
	Selma, AL 36701		

Operator (Entity Name):		Selma Health and Rehab LLC
Proposed Date of Transaction is on or after:		11/01/2019
Part IV: Terms of Purchase		
Monetary Value of Purchase:	\$_	14,950,000
Type of Beds:	_	Skilled Nursing Facility beds
Number of Beds/ESRD Stations:		172
Financial Scope: to Include Prelimin Construction, and Yearly Operating Cos		Estimate of the Cost Broken Down by Equipment
Projected Equipment Cost:	\$_	0
Projected Construction Cost:	\$_	0
Projected Yearly Operating Cost:	\$_	8,805,910
Projected Total Cost:		8,805,910

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 belief.	contained in this notification is true and	correct to the best of my knowledge and				
Owner(s):	Selma AL SNF Realty LLC	Owner entity's representative: Aaron Friedman				
Operator(s):	N/A	N/A				
Title/Date:	Title: Manager	Date of signature: $\sqrt{9/20/19}$				
SWORN to and	d subscribed be to the A LASS WENDY WENDY STENHOUSE #208 733 #208 T33	My Commission Expires: 2020-09-03				
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. 410-1-312. 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 Statutory Au History: Nev	ı M. Lambert thority: § 22-21-271(c), <u>Code of Alal</u> v Rule	<u>pama</u> , 1975				

Part V: Certification of Information

Current Authority Signature(s):

The information belief.	contained in this notification is true and	correct to the best of my knowledge and				
Owner(s):	N/A	\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\				
Operator(s):	Blue Ridge Healthcare Selma LLC	Operator entity's representative; Levi Rudd				
Title/Date:	Title: Managing Member	Date of signature: / 9/20//9				
SWORN to and	Johanna Loffredo COMMISSION # GG232791 EXPIRES: Oct. 23, 2022 Bonded Thru Aaron Notary	Notaty Public My Commission Expires: 04 23,2022				
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. 410-1-312. 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 an	d 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

State Health Planning and Development Agency	Alabama CON Rules & Regulations
SWORN to and subscribed before me, this day of	f,
(Seal)	Notary Public
	My Commission Expires:
Acquiring Authority Signature(s):	
I agree to be responsible for reporting of all services properiod, as specified in ALA. ADMIN. CODE r. 410-1-3-notification is true and correct to the best of my knowledge.	.12. The information contained in this
Purchaser(s): Shalom Lerner	AUL
Operator(s): Shalom Lerner	MI
Title/Date: <u>Member</u> ✓	09/06/19
SWORN to and subscribed before me, this day of	<u>Sept</u> 2019.
(Seal) LEAH HOROWITZ Notary Public, State of New York Reg. No. 01H06367811 Qualified in Kings County Commission Expires 11/27/2	My Commission Expires: (1)27/04

Author: Alva M. Lambert

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

History: New Rule

Alabama State Health Planning & Development Agency

CHANGE OF OWNERSHIP

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), not stock. The real property will be acquired by 11 Bell LLC. The operations will be transferred to Selma Health and Rehab LLC. There will be a new lease agreement executed between 11 Bell LLC and Selma Health and Rehab LLC once the transaction has occurred.

Note:

The projected yearly operating costs of \$8,805,910 represent amounts which are consistent with current operating costs and no substantial increases are expected.