

# NC DEPARTMENT OF HEALTH AND HUMAN SERVICES

ROY COOPER • Governor MANDY COHEN, MD, MPH • Secretary MARK PAYNE • Director, Division of Health Service Regulation

# VIA EMAIL ONLY

October 13, 2021

Greg Gaylis, Arnall Golden Gregory, LLP Greg.gaylis@agg.com

No Review	
Record #:	See Attachment A
Date of Request:	October 1, 2021
Facility Name:	See Attachment A
FID #:	See Attachment A
Business Name:	See Attachment A
Business #:	See Attachment A
Project Description:	Change in indirect ownership of operating entity
County:	See Attachment A

Dear Mr. Gaylis:

The Healthcare Planning and Certificate of Need Section, Division of Health Service Regulation (Agency) received your correspondence regarding the project described above. Based on the CON law **in effect on the date of this response to your request**, the project as described is not governed by, and therefore, does not currently require a certificate of need. If the CON law is subsequently amended such that the above referenced proposal would require a certificate of need, this determination does not authorize you to proceed to develop the above referenced proposal when the new law becomes effective.

This determination is binding only for the facts represented in your correspondence. If changes are made in the project or in the facts provided in the correspondence referenced above, a new determination as to whether a certificate of need is required would need to be made by this office.

Please do not hesitate to contact this office if you have any questions.

Sincerely,

Michael McKillip, Project Analyst

Micheala Mitchell

Micheala Mitchell Chief

cc: Adult Care Licensure Section, DHSR

## NC DEPARTMENT OF HEALTH AND HUMAN SERVICES • DIVISION OF HEALTH SERVICE REGULATION HEALTHCARE PLANNING AND CERTIFICATE OF NEED SECTION

LOCATION: 809 Ruggles Drive, Edgerton Building, Raleigh, NC 27603 MAILING ADDRESS: 809 Ruggles Drive, 2704 Mail Service Center, Raleigh, NC 27699-2704 https://info.ncdhhs.gov/dhsr/ • TEL: 919-855-3873

AN EQUAL OPPORTUNITY / AFFIRMATIVE ACTION EMPLOYER

# Attachment A

Record	Name of Facility	County	FID	Business Name	Business
#					#
3696	The Addison of Durham	Durham	100294	GA HC REIT II Durham ALF TRS Sub, LLC	3467
3697	The Addison of Fayetteville	Cumberland	080399	GA HC REIT II Fayetteville ALF TRS Sub, LLC	3468
3698	The Addison of Fuquay-Varina	Wake	000461	GA HC REIT II Fuquay-Varina ALF TRS Sub, LLC	3469
3699	The Addison of Indian Trail	Union	080125	GA HC REIT II Indian Trail ALF TRS Sub, LLC	3470
3700	The Addison of Knightdale	Wake	000453	GA HC REIT II Knightdale ALF TRS Sub, LLC	3471
3701	The Addison of Lincolnton	Lincolnton	000456	GA HC REIT II Lincolnton ALF TRS Sub, LLC	3472
3702	Falls River Court Memory Community	Wake	980873	LSREF Golden Ops 26 (NC), LLC	3473
3703	Fall River Village Assisted Living	Wake	980579	LSREF Golden Ops 26 (NC), LLC	3473



Atlanta Office 171 17th Street NW, Suite 2100 Atlanta, GA 30363-1031 Direct phone: 404.873.8170 Direct fax: 404.873.8171 E-mail: greg.gaylis@agg.com

October 1, 2021

## VIA FEDERAL EXPRESS

Ms. Michaela Mitchell North Carolina Department of Health and Human Services Division of Health Service Regulation Healthcare Planning and Certificate of Need Section 809 Ruggles Drive Raleigh, North Carolina 27603

# Re: North Carolina Adult Care Homes Proposed Change in Indirect Ownership

Dear Ms. Mitchell:

We are writing on behalf of the facilities listed in Attachments A-1 and A-2 (the "Facilities") to inform you of a change in the indirect ownership of the operator and the entity that owns the real estate for each of the Facilities, which is scheduled to occur on or about January 1, 2022 (the "Transaction").

As reflected in the enclosed diagrams at Attachments B-1 and B-2, there will be no change to the operators as the licensees. There will be no change in the direct ownership of the operators or real estate entities and no change in existing lease arrangements. The change in certain indirect owners will take place multiple levels above the operators in the corporate structure. The operators' federal tax identification numbers will not change. In addition, there will be no changes to Facility staff and the Facilities' day-to-day operations and management agreements will not be impacted as a direct result of the Transaction.

It is our understanding that the changes described above do not require certificate of need review or approval, therefore we respectfully request the issuance of a "**No Review Letter**" confirming our understanding.

Thank you for your attention to this matter. If you have any questions, please do not hesitate to contact me.

Ms. Michaela Mitchell October 1, 2021 Page 2

Sincerely,

Arnall Golden Gregory LLP

Greg M. Gaylis

Enclosures

cc: Ann Harrington, Esq. (w/encl.) Hedy Rubinger, Esq. (w/encl.)

# ATTACHMENT A-1

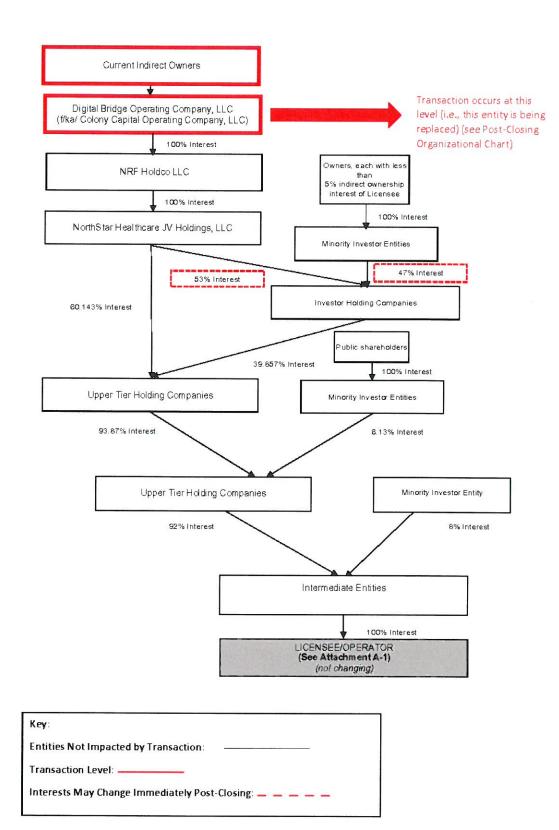
Facility Name & Address	Facility Type
LSREF Golden Ops 26 (NC), LLC	Adult Care Home
Falls River Court Memory Care Community	
1130 Falls River Avenue	
Raleigh, North Carolina	
LSREF Golden Ops 26 (NC), LLC	Adult Care Home
Falls River Village Assisted Living Community	
1110 Falls River Avenue	
Raleigh, North Carolina	

# ATTACHMENT A-2

Facility Name & Address	Facility Type
GA HC REIT II Durham ALF TRS Sub, LLC The Addison of Durham 4713 Garrett Road Durham, North Carolina	Adult Care Home
GA HC REIT II Fayetteville ALF TRS Sub, LLC The Addison of Fayetteville 1164 71st School Road Fayetteville, North Carolina	Adult Care Home
GA HC REIT II Fuquay-Varina ALF TRS Sub, LLC The Addison of Fuquay-Varina 6516 Johnson Pond Road Fuquay-Varina, North Carolina	Adult Care Home
GA HC REIT II Indian Trail ALF TRS Sub, LLC The Addison of Indian Trail 5306 Secrest Short Cut Road Monroe, North Carolina	Adult Care Home
GA HC REIT II Knightdale ALF TRS Sub, LLC The Addison of Knightdale 2408 Hodge Road Knightdale, North Carolina	Adult Care Home
GA HC REIT II ALF TRS Lincolnton Sub, LLC The Addison of Lincolnton 440 Salem Church Road Lincolnton, North Carolina	Adult Care Home

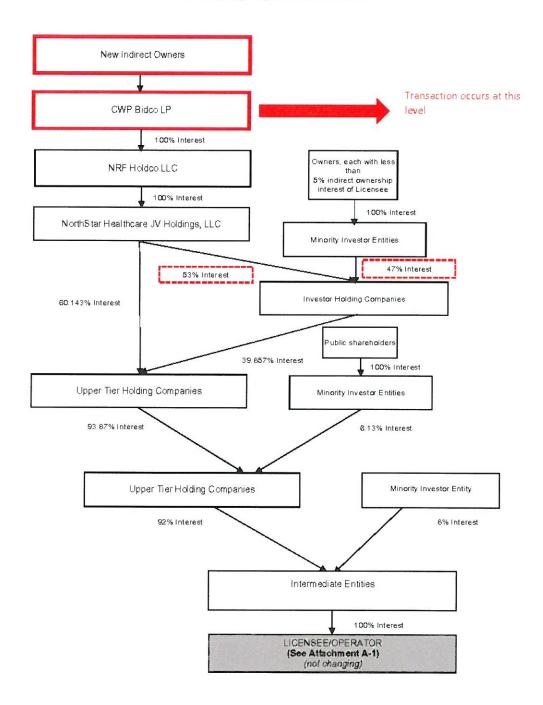
#### ATTACHMENT B-1 Ownership Diagram

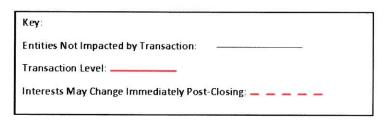
#### Pre-Closing Organizational Chart



### ATTACHMENT B-1 Ownership Diagram

## Post-Closing Organizational Chart

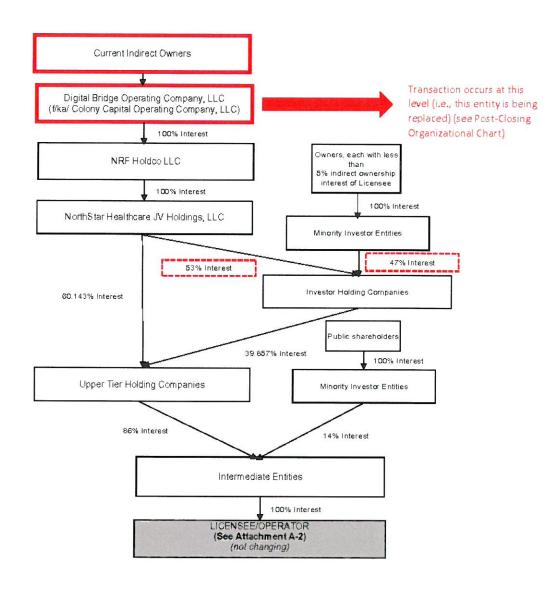


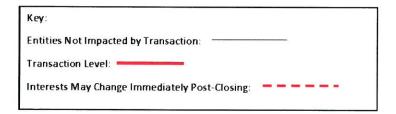


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## ATTACHMENT B-2 Ownership Diagram

### Pre-Closing Organizational Chart





## ATTACHMENT B-2 Ownership Diagram

## **Post-Closing Organizational Chart**

