



**North Carolina Department of Health and Human Services
Division of Health Service Regulation**

Pat McCrory
Governor

Richard O. Brajer
Secretary DHHS

Mark Payne, Director
Health Service Regulation

October 7, 2016

Kurt B. Fryar
106 N. Water Street, Suite 110
Wilmington, NC 28401

No Review

Record #: 2072
Business Name: TRICENTER, LLC
Business #: 2472
Project Description: Acquisition of the real property located at 3516 Tricenter Boulevard in Durham
County: Durham

Dear Mr. Fryar:

The Healthcare Planning and Certificate of Need Section, Division of Health Service Regulation (Agency) received your letter of September 26, 2016 regarding the above referenced proposal. Based on the CON law **in effect on the date of this response to your request**, the proposal described in your correspondence is not governed by, and therefore, does not currently require a certificate of need. However, please note that 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.

However, you need to contact the Agency's Acute and Home Care Licensure and Certification Section, DHSR to determine if they have any requirements for development of the proposed project.

It should be noted that this determination is binding only for the facts represented in your correspondence. Consequently, if changes are made in the project or in the facts provided in your correspondence referenced above, a new determination as to whether a certificate of need is required would need to be made by this office. Changes in a project include, but are not limited to: (1) increases in the capital cost; (2) acquisition of medical equipment not included in the original cost estimate; (3) modifications in the design of the project; (4) change in location; and (5) any increase in the number of square feet to be constructed.

Please contact this office if you have any questions. Also, in all future correspondence you should reference the Facility ID # (FID) if the facility is licensed.

Sincerely,

Bernetta Thorne-Williams
Project Analyst

Martha J. Frisone
Assistant Chief, Certificate of Need

cc: Acute and Home Care Licensure and Certification Section, DHSR
Paige Bennett, Assistant Chief, Healthcare Planning, DHSR

Healthcare Planning and Certificate of Need Section

www.ncdhhs.gov

Telephone: 919-855-3873 • Fax: 919-715-4413

Location: Edgerton Building • 809 Ruggles Drive • Raleigh, NC 27603

Mailing Address: 2704 Mail Service Center • Raleigh, NC 27699-2704

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Record # 2072



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September 26, 2016

Ms. Martha Frisone
Assistant Chief Certificate of Need Section
NCDHHS
2704 Mail Service Center
Raleigh, NC 27699-2704

Re: TRICENTER, LLC

Dear Ms. Frisone:

I write to you as attorney for TRICENTER, LLC, a North Carolina Limited Liability Company that will soon be organized with the North Carolina Secretary of State. Pursuant to N.C.G.S. §131E-184(a)(8), this letter is to inform you that my client intends to purchase the real property, land and building(s), located at 3516 Tricenter Blvd., Durham, North Carolina. The current owner of this piece of real property is CORNWALLIS ROAD, LLC. The current owner of this piece of real property leases said real property to BIO-MEDICAL APPLICATIONS OF NORTH CAROLINA, INC., A DELAWARE CORPORATION d/b/a FESENIUS MEDICAL CARE SOUTH DURHAM (hereinafter "Fresenius").

Fresenius currently operates and will continue to operate a dialysis facility at this piece of real property. My client will not own nor operate the dialysis center but will merely lease the real property, land and building(s), to Fresenius. My client hereby acknowledges that it will have no rights to the dialysis business other than the real estate in which the facility is operated and it will not have any ownership or rights in Fresenius' Certificate of Need.

My client signed a Purchase Sales Agreement on the 16th day of September, 2016, and anticipates closing within one (1) month. If you have any questions, please do not hesitate to give me a call.

Yours Truly,

A handwritten signature in black ink that reads "Kurt B. Fryar".

Kurt B. Fryar

cc: Nancy Armitage
920 Winter Street
Waltham, Massachusetts 02451