



NC DEPARTMENT OF  
**HEALTH AND  
HUMAN SERVICES**

ROY COOPER • Governor

MANDY COHEN, MD, MPH • Secretary

MARK PAYNE • Director, Division of Health Service Regulation

July 25, 2019

Greg Gaylis  
171 17<sup>th</sup> Street NW, Suite 2100  
Atlanta, GA 30363-1031

**Exempt from Review**

**Record #:** 2995  
**Facility Name:** Sunrise on Providence  
**FID #:** 980794  
**Business Name:** AL I/Providence Senior Housing, LP  
**Business #:** 3070  
**Project Description:** Change in corporate ownership structure and licensee/operator resulting in ownership by a new business entity  
**County:** Mecklenburg

Dear Mr. Gaylis:

The Healthcare Planning and Certificate of Need Section, Division of Health Service Regulation (Agency), determined that based on your letter of **July 17, 2019**, the above referenced proposal is exempt from certificate of need review in accordance with N.C. Gen. Stat. §131E-184(a)(8). Therefore, you may proceed to offer, develop, or establish the above referenced project without a certificate of need.

However, you need to contact the Agency's Adult Care Licensure Section 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 by you. 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 the Agency. 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.

If you have any questions concerning this matter, please feel free to contact this office.

Sincerely,

Julie M. Faenza  
Project Analyst

Martha J. Frisone  
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

www.ncdhhs.gov/dhsr • TEL: 919-855-3873

AN EQUAL OPPORTUNITY / AFFIRMATIVE ACTION EMPLOYER



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

July 17, 2019

**VIA FEDERAL EXPRESS**

Ms. Martha Frisone  
NC Division of Health Service Regulation  
Certificate of Need Section  
809 Ruggles Drive  
Raleigh, NC 27603

**Re: NC Adult Care Homes: Operator and Real Estate Ownership Changes**  
Sunrise on Providence  
5114 Providence Road, Charlotte, NC 28226  
License Number: HAL-060-057

Dear Ms. Frisone:


This letter is to inform you of proposed changes involving the above-referenced facility (the "Facility"), which will result in (1) a new operating entity and indirect owners above the operating entity, and (2) a new indirect owner of the real estate. In addition, the entity that owns the real estate will be converted from a limited liability company to a limited partnership, but its Tax Identification Number will remain the same. These proposed changes are the result of an internal restructuring of the operator and the entity that owns the real estate for the Facility (the "Restructuring"). A "before-and-after" structure chart showing the current structure and the proposed structure is enclosed with this letter as **Attachment A** for your reference. As depicted in **Attachment A**, the new operator's name will be AL I/Providence Senior Housing Opco, LP and the real estate owner's name will be AL I/Providence Senior Housing, LP.

It is our understanding that the Restructuring described above and in the enclosed structure chart does not require any additional filings and **we respectfully request the issuance of an "Exemption or No Review Letter" confirming or understanding.**

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

Sincerely,

Arnall Golden Gregory LLP



Greg Gaylis

Enclosures

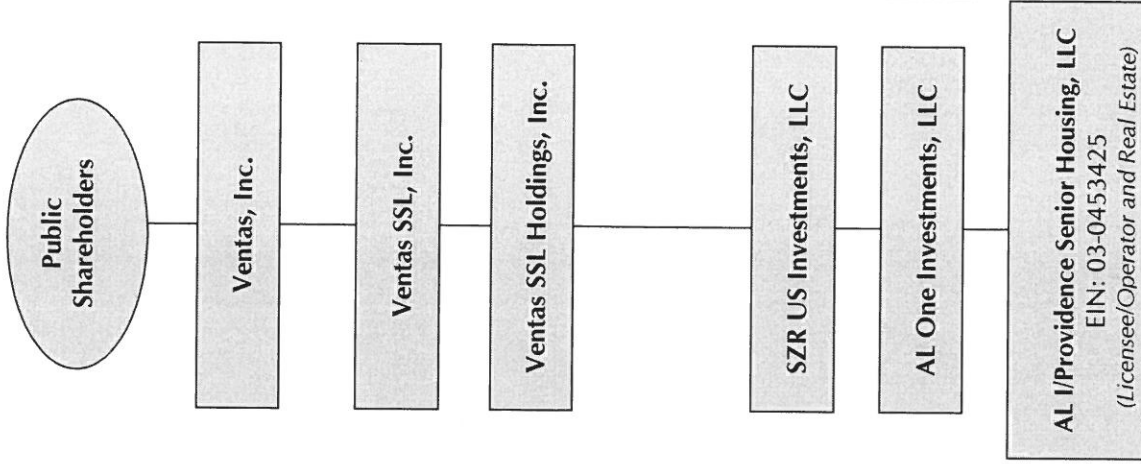
cc: Matthew Leffler, Esq.  
Michael J. Stein  
Hedy S. Rubinger, Esq.

ATTACHMENT A

**(See Attached)**

Sunrise on Providence  
North Carolina  
Overview of Internal Restructuring

CURRENT



PROPOSED

