



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

Pat McCrory
Governor

Aldona Z. Wos, M.D.
Ambassador (Ret.)
Secretary DHHS

Drexdal Pratt
Division Director

January 14, 2013

Ronald H. Rodgers, Managing Director
Fresenius Vascular Care Raleigh MSO, LLC
1200 W. Swedesford Road, Building 3, Suite 120
Berwyn PA 19312

Exempt from Review – Acquisition of Facility

Facility: The Capital Access Center
Acquisition by: Fresenius Vascular Care Raleigh MSO, LLC
County: Wake
FID #: 090947

Dear Mr. Rodgers:

In response to your letter of December 14, 2012, the above referenced proposal is exempt from certificate of need review in accordance with N.C.G.S 131E-184(a)(8). Therefore, Fresenius Vascular Care Raleigh MSO, LLC may proceed to acquire the above referenced health service facility without first obtaining a certificate of need. Note that pursuant to N.C.G.S. §131E-181(b): *“A recipient of a certificate of need, or any person who may subsequently acquire, in any manner whatsoever permitted by law, the service for which that certificate of need was issued, is required to materially comply with the representations made in its application for that certificate of need.”*

It should be noted that this Agency's position is based solely on the facts represented by you and that any change in facts as represented would require further consideration by this Agency and a separate determination. If you have any questions concerning this matter, please feel free to contact this office.

Sincerely,

Michael J. McKillip
Project Analyst

Craig K. Smith, Chief
Certificate of Need Section

www.ncdhhs.gov • <http://www.ncdhhs.gov/dhsr>
Tel (919) 855-3873 • Fax (919) 733-8139

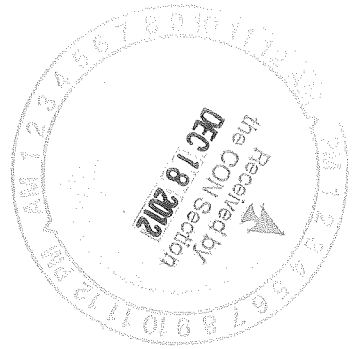
Location: Edgerton Building, 809 Ruggles Drive • Raleigh, NC 27603
Mailing Address: 2704 Mail Service Center • Raleigh, NC 27699-2704
An Equal Opportunity/ Affirmative Action Employer



Duke



Fresenius Vascular Care



December 14, 2012

Mr. Craig R. Smith, Chief
Certificate of Need Section
Division of Health Service Regulation
North Carolina Department of Health and Human Services
809 Ruggles Drive
Raleigh, North Carolina 27603

Re: Notice of Intent to Acquire an Existing Health Service Facility / In Accordance With N.C
General Statute 131E-184(a)(8) / Assets of Raleigh Access Center / Wake County

Dear Mr. Smith:

In accordance with N.C General Statute 131E-184(a)(8), Fresenius Vascular Care Raleigh MSO, LLC., is writing to advise you of our intention to acquire the existing Diagnostic Center and assets of Raleigh Access Center. Please accept this letter as our formal notice of intent to acquire the facility and equipment currently owned by the facility.

Fresenius Vascular Care Raleigh MSO, LLC is registered with the North Carolina Secretary of State. A copy of the registration is included as an attachment to this letter. Fresenius Vascular Care Raleigh MSO, LLC is a joint venture between Fresenius Vascular Care, LLC, a 70% owner (FVC, LLC is a wholly owned subsidiary of Fresenius Medical Care Holdings, Inc) and Raleigh Access Center, LLC (owned by Capital Nephrology, P.A. and Wake Nephrology Associates, P.A.) a 30% owner.

Fresenius Vascular Care Raleigh MSO, LLC expects that this acquisition will be formally concluded on or before December 21, 2012.

If you have any questions please contact me at (610) 644 – 8900, or email Ron.Rodgers@fmc-na.com. In the alternative you may contact Jim Swann, FMC Director Market Development and Certificate of Need; Jim's contact information is: Phone, 919.896.7230, or email jim.swann@fmc-na.com.

Sincerely,

Ronald H. Rodgers
Managing Director, Fresenius Vascular Care Raleigh MSO, LLC

Attachment: Copy, Fresenius Vascular Care Raleigh MSO, LLC registration NC Secretary of State

ms



NORTH CAROLINA Department of the Secretary of State

To all whom these presents shall come, Greetings:

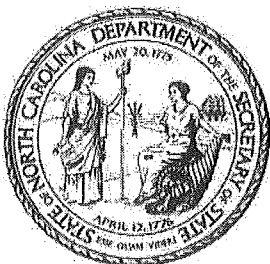
I, Elaine F. Marshall, Secretary of State of the State of North Carolina, do hereby certify the following and hereto attached to be a true copy of

APPLICATION FOR CERTIFICATE OF AUTHORITY

OF

FRESENIUS VASCULAR CARE RALEIGH MSO, LLC

the original of which was filed in this office on the 10th day of December, 2012.



Scan to verify online.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed my official seal at the City of Raleigh, this 10th day of December, 2012.

Elaine F. Marshall

Secretary of State

State of North Carolina
 Department of the Secretary of State

C201234100503

APPLICATION FOR CERTIFICATE OF AUTHORITY
 FOR LIMITED LIABILITY COMPANY

Pursuant to §7C-7-04 of the General Statutes of North Carolina, the undersigned limited liability company hereby applies for a Certificate of Authority to transact business in the State of North Carolina, and for that purpose submits the following:

1. The name of the limited liability company is Fresenius Vascular Care Raleigh MSO, LLC;
 and if the limited liability company name is unavailable for use in the State of North Carolina, the name the limited liability company wishes to use is _____

2. The state or country under whose laws the limited liability company was formed is: Delaware

3. The date of formation was 11/21/2012; its period of duration is: perpetual

4. Principal office information: (Select either a or b.)

a. The limited liability company has a principal office.

The street address and county of the principal office of the limited liability company is:

Number and Street 920 Winter Street
 City, State, Zip Code Waltham, MA 02451 County Middlesex

The mailing address, *if different from the street address*, of the principal office of the corporation is:

b. The limited liability company does not have a principal office.

5. The street address and county of the registered office in the State of North Carolina is:

Number and Street 150 Fayetteville Street, Box 1011
 City, State, Zip Code Raleigh, North Carolina 27601 County Wake

6. The mailing address, *if different from the street address*, of the registered office in the State of North Carolina is:

7. The name of the registered agent in the State of North Carolina is: CT Corporation System

CORPORATIONS DIVISION

P. O. BOX 29622

RALEIGH, NC 27626-0622

(Revised January 2002)

(Form L-09)

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APPLICATION FOR CERTIFICATE OF AUTHORITY
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8. The names, titles, and usual business addresses of the current managers of the limited liability company are:
(use attachment if necessary)

<u>Name</u>	<u>Business Address</u>
Ronald H. Rodgers, Jr.	1200 W. Swedesford Road, Berwyn, PA 19382

9. Attached is a certificate of existence (or document of similar import), duly authenticated by the secretary of state or other official having custody of limited liability company records in the state or country of formation. The Certificate of Existence must be less than six months old. A photocopy of the certification cannot be accepted.

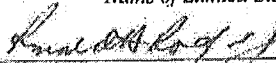
10. If the limited liability company is required to use a fictitious name in order to transact business in this State, a copy of the resolution of its managers adopting the fictitious name is attached.

11. This application will be effective upon filing, unless a delayed date and/or time is specified: _____

This the 5 day of December, 2012

Fresenius Vascular Care Raleigh MSO, LLC

Name of Limited Liability Company



Signature of Manager

Ronald H. Rodgers, Jr.

Type or Print Name

Notes:

1. Filing fee is \$250. This document must be filed with the Secretary of State.

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