

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.

- Change in Direct Ownership or Control (of a vested Facility; ALA. CODE §§ 22-20-271(d), (e))
 Change in Certificate of Need Holder (ALA. CODE § 22-20-271(f))
 Change in Facility Management (Facility Operator)

Any transaction other than those above-described requires an application for a Certificate of Need.

Part I: Facility Information

SHPDA ID Number: 109-S5504
(This can be found at www.shpda.alabama.gov, Health Care Data, ID Codes)

Name of Facility/Provider: Noble Manor, LLC #3 Memory Care
(ADPH Licensure Name)

Physical Address: 610 Botts Ave.
Troy, AL 36081

County of Location: PIKE

Number of Beds/ESRD Stations: 16

CON Authorized Service Area (Home Health and Hospice Providers Only). Attach additional pages if necessary. _____

Part II: Current Authority (Note: If this transaction will result in a change in direct ownership or control, as defined under ALA. CODE § 22-20-271(e), please attach organizational charts outlining current and proposed structures.)

Owner (Entity Name) of Facility named in Part I: Noble Manor, LLC

Mailing Address: 610 Botts Ave
Troy, AL 36081
Noble Manor, LLC

Operator (Entity Name): _____

Part III: Acquiring Entity Information

Name of Entity: SSSLTroy, LLC

Mailing Address: PO Box 173
Pittsview, AL 36871

Operator (Entity Name): SSSL Troy, LLC

Proposed Date of Transaction is on or after: 4/30/2022

Part IV: Terms of Purchase

Monetary Value of Purchase: \$ 708,333.00

Type of Beds: Specialty Care

Number of Beds/ESRD Stations: 16

Financial Scope: to Include Preliminary Estimate of the Cost Broken Down by Equipment, Construction, and Yearly Operating Cost:

Projected Equipment Cost: \$ 50,000.00

Projected Construction Cost: \$ 50,000.00

Projected Yearly Operating Cost: \$ 500,000.00

Projected Total Cost: \$ 600,000.00

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 contained in this notification is true and correct to the best of my knowledge and belief.

Owner(s): Dale J. Law

Jimmy Law

Operator(s): Dale J. Law

Jimmy Law

Title/Date: Member 4-1-22

Member 4-1-22

SWORN to and subscribed before me, this 1st day of April, 2022.



Traci D. Herndon
Notary Public

My Commission Expires: 10/27/2025

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. 410-1-3-12. The information contained in this notification is true and correct to the best of my knowledge and belief.

Purchaser(s): Larry Kite [Signature]

Operator(s): _____

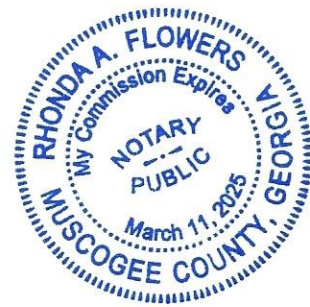
Title/Date: Manager 4/1/22

SWORN to and subscribed before me, this 1st day of April, 2022.

[Signature]
Notary Public

(Seal)

My Commission Expires: 3-11-25



Author: Alva M. Lambert
Statutory Authority: § 22-21-271(c), Code of Alabama, 1975
History: New Rule

NOTICE OF CHANGE OF OWNERSHIP/CONTROL

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 Mailing Address: Troy, AL 36081
Noble Manor, LLC
 Operator (Entity Name): _____

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Name of Entity: SSSLTroy, LLC
 Mailing Address: PO Box 173
Pittsview, AL 36871

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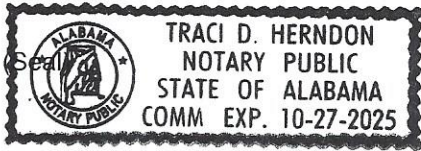
Part V: Certification of Information

Current Authority Signature(s):

The information contained in this notification is true and correct to the best of my knowledge and belief.

| | | |
|--------------|----------------------|----------------------|
| Owner(s): | <u>Daee J. Law</u> | <u>Jimmy Law</u> |
| Operator(s): | <u>Daee J. Law</u> | <u>Jimmy Law</u> |
| Title/Date: | <u>Member 3/9/22</u> | <u>Member 3/9/22</u> |

SWORN to and subscribed before me, this 9th day of March, 2022.



Traci D Herndon
Notary Public

My Commission Expires: 10/27/25

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. 410-1-3-.12. The information contained in this notification is true and correct to the best of my knowledge and belief.

Purchaser(s): Larry Kite [Signature]

Operator(s): _____

Title/Date: Manager 3/9/22

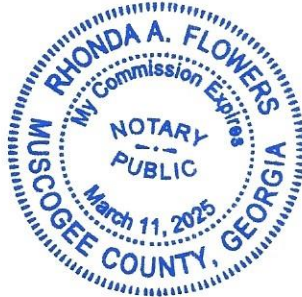
SWORN to and subscribed before me, this 9th day of March, 2022.

[Signature]

Notary Public

My Commission Expires: 3-11-25

(Seal)



Author: Alva M. Lambert
Statutory Authority: § 22-21-271(c), Code of Alabama, 1975
History: New Rule


SERENITY SOUTH
SENIOR LIVING
PO Box 173 | Pittsview, Alabama 36871

March 14, 2022

Alabama State Health Planning and Development Agency
RSA Union Building
100 N. Union Street - Suite 870
P.O. Box 303025
Montgomery, Alabama 36104

Re: Notice of Change of Ownership
Name of Facility: Noble Manor
Facility Address: 610 Botts Ave, Troy, AL 36081
Applicant: SSSL Troy, LLC

Dear Sir/Mam:

Please find addition information required for the Change of Ownership Notification.

- 1- Services provided – The applicant has never provided Specialty Care Assisted Living services. SSSL Troy, LLC is a new entity formed to take ownership of this facility and will provided the same services currently being provided by the current owner/operator. The current staff will be retained by the new owner.
- 2- There are not new beds planned for the facility,
- 3- There is not a plan for the conversion of any beds.
- 4- All of the assets including real estate and personal property is being acquired by the new owner.

Sincerely,



Larry Kite
Manager
SSSL Troy, LLC
A Serenity South Company