## STATE OF FLORIÐA AGENCY FOR HEALTH CARE ADMINISTRATION

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2012 FEB 21 A 10:59

# SOUTH DADE ELDERLY CARE CORP., d/b/a HOME SWEET HOME NO. 2,

Petitioner,

v.

DOAH No. 10-0019 AHCA No. 2009013367

STATE OF FLORIDA, AGENCY FOR HEALTH CARE ADMINISTRATION,

Respondent.

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## FINAL ORDER

Having reviewed the Notice of Intent to Deny (hereinafter "NOID"), and all other matters of record, the Agency for Health Care Administration finds and concludes as follows:

1. The Agency has jurisdiction over the above-named Petitioner pursuant to Chapter 408, Part II, Florida Statutes, and the applicable authorizing status and administrative code provisions.

2. The Agency issued the attached NOID and Elections of Rights form to the Petitioner with respect to its license renewal application. (Ex. A) The Election of Rights form advised of the right to an administrative hearing. The Petitioner received the NOID and timely filed the Election of Rights form with the Agency Clerk. (Ex. B)

3. On September 30, 2011, the Agency filed a motion to dismiss with the Agency Clerk, citing the mootness of the NOID due to the revocation of the underlying assisted living facility license. (Ex. C) The Agency Clerk granted the motion and directed the entry of a final order. (Ex. D)

Based upon the foregoing, it is **ORDERED**:

1. The Agency's NOID is withdrawn as moot due to the revocation of the underlying license to operate the assisted living facility in question.

ORDERED in Tallahassee, Florida, on this <u>17</u> day of <u>Alouacy</u>, 2012.

Elizabeth Dudek, Secretary Agency for Health Care Administration

### **NOTICE OF RIGHT TO JUDICIAL REVIEW**

A party that is adversely affected by this Final Order is entitled to seek judicial review which shall be instituted by filing one copy of a notice of appeal with the agency clerk of AHCA, and a second copy, along with filing fee as prescribed by law, with the District Court of Appeal in the appellate district where the agency maintains its headquarters or where a party resides. Review of proceedings shall be conducted in accordance with the Florida appellate rules. The notice of appeal must be filed within 30 days of rendition of the order to be reviewed.

#### **CERTIFICATE OF SERVICE**

I HEREBY CERTIFY that a true and correct copy of this Final Order was served on the belownamed persons/entities by the method designated on this <u>21</u> day of <u>februar</u>, 2012.

Richard Shoop, Agency Clerk Agency for Health Care Administration 2727 Mahan Drive, Mail Stop #3 Tallahassee, Florida 32308-5403 Telephone (850) 412-3630

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