

STATE OF FLORIDA
DIVISION OF ADMINISTRATIVE HEARINGS

FILED
AHCA
AGENCY CLERK

2018 JUN 13 A 10:15

AGENCY FOR HEALTH CARE
ADMINISTRATION,

DOAH CASE NO.: 15-3110MPI

MPI CASE NO.: 2015-0002445

C.I. NO.: 11-2613-000

PROVIDER NO.: 010058700

NPI NO.: 1982688230

LICENSE NO.: 4033*

RENDITION NO.: AHCA-18 - 0376 -S-MDO

Petitioner,

vs.

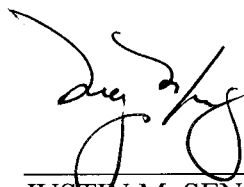
SOUTH MIAMI HOSPITAL, INC. D/B/A
SOUTH MIAMI HOSPITAL,

Respondent.

FINAL ORDER

THE PARTIES resolved all disputed issues and executed a Settlement Agreement. The parties are directed to comply with the terms of the attached settlement agreement. Based on the foregoing, this file is **CLOSED**.

DONE and ORDERED on this the 12 day of June, 2018, in Tallahassee, Florida.



JUSTIN M. SENIOR, SECRETARY
Agency for Health Care Administration

*License No.: 4033 is accurate on Final Order.

A PARTY WHO IS ADVERSELY AFFECTED BY THIS FINAL ORDER IS ENTITLED TO A 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 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.

Copies furnished to:

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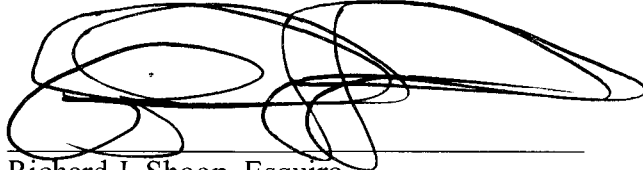
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CERTIFICATE OF SERVICE

I HEREBY CERTIFY that a true and correct copy of the foregoing has been furnished to the above named addressees by U.S. Mail or other designated method on this the 13th day of ~~May~~ June, 2018.



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