STATE OF FLORIDA AHCA AGENCY FOR HEALTH CARE ADMINISTRATION AGENCY CLERK

STATE OF FLORIDA, AGENCY FOR HEALTH CARE ADMINISTRATION,

2016 AUG 31 A 9 52

Case No. 16-3158

License No. 12510 File No. 11968592

Provider Type: Assisted Living Facility

Petitioner,	2015005694
V.	AHCA Nos. 2015005684 RENDITION NO.: AHCA-1/2 7659 -S-OLC
SWEET RETIREMENT HOME, INC.,	
Respondent.	_/
SWEET RETIREMENT HOME, INC.,	
Petitioner,	Case No. 16-3158
i cutioner,	AHCA No. 2016004646

STATE OF FLORIDA, AGENCY FOR HEALTH CARE ADMINISTRATION,

v.

Respondent.

FINAL ORDER

Having reviewed the Administrative Complaint, and all other matters of record, the Agency for Health Care Administration finds and concludes as follows:

- 1. The Agency issued the attached Administrative Complaint and Notice of Intent to Deny Renewal Application to the Provider. (Ex. 1) The parties have since entered into the attached Settlement Agreement, which is adopted and incorporated by reference into this Final Order. (Ex. 2)
 - 2. The parties shall comply with the terms of the Settlement Agreement.
- 3. The Provider granted a provisional license with a license expiration date of November 1, 2016.
- 4. The Provider shall pay the Agency \$16,440.00. If full payment has been made, the cancelled check acts as receipt of payment and no further payment is required. If full payment has not been made, payment is due within 30 days of the Final Order. Overdue amounts are subject to statutory interest and may be referred to collections. A check made payable to the "Agency for Health Care Administration" and containing the AHCA ten-digit case number should be sent to:

Central Intake Unit Agency for Health Care Administration 2727 Mahan Drive, Mail Stop 61 Tallahassee, Florida 32308

Elizabeth Dudek, Secretary

Agency for Health Care Administration

NOTICE OF RIGHT TO JUDICIAL REVIEW

A party who is adversely affected by this Final Order is entitled to 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

> Richard J. Shoop, Agency Clerk Agency for Health Care Administration

2727 Mahan Drive, Mail Stop 3 Tallahassee, Florida 32308

Telephone: (850) 412-3630

Facilities Intake Unit	Central Intake Unit
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