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AHCA
ASSISTANT CLERK

2018 JAN 22 P 12: 25

**STATE OF FLORIDA
AGENCY FOR HEALTH CARE ADMINISTRATION**

STATE OF FLORIDA AGENCY FOR
HEALTH CARE ADMINISTRATION,

Petitioner,

vs.

SUNSHINE ELDERCARE
OF MIAMI LAKES INC.

Respondent.

DOAH No.: 17-2091

CASE No.: 2016013287
2016001606
2016013291
2016013392
2016013391

RENDITION NO.: AHCA- 18 -0038 -S-OLC

SUNSHINE ELDERCARE
OF MIAMI LAKES INC.

Petitioner,

vs.

CASE No.: 2017013538

STATE OF FLORIDA AGENCY FOR
HEALTH CARE ADMINISTRATION,

Respondent.

FINAL ORDER

Having reviewed the Administrative Complaints, 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 Election of Rights forms to the Respondent. (Ex. 1). The Agency also issued a Notice of Intent to Deny Relicensure. (Ex.2). The parties have since entered into the attached Settlement Agreement, which is adopted and incorporated by reference into this Final Order. (Ex. 3).

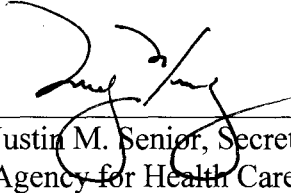
2. The Respondent shall pay the Agency eight thousand six hundred ninety-three dollars and eighty-eighty-six cents (\$8,693.86). If full payment has been made, the cancelled check acts as receipt of payment and no further payment is required. If full payment has not been made, payment is due within 60 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

3. Nothing in this Agreement shall prohibit the Agency from denying Sunshine's application for licensure based upon any statutory and/or regulatory provision, including, but not limited to, the failure of Sunshine to a satisfactorily complete a survey reflecting compliance with all statutory and rule provisions as required by law.

ORDERED at Tallahassee, Florida, on this 22 day of January, 2018.



Justin M. Senior, 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

I CERTIFY that a true and correct copy of this Final Order was served on the below-named persons by the method designated on this 22nd day of January, 2018.


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

<p>Facilities Intake Unit Agency for Health Care Administration (Electronic Mail)</p>	<p>Central Intake Unit Agency for Health Care Administration (Electronic Mail)</p>
<p>Thomas J. Walsh II, Senior Attorney Office of the General Counsel Agency for Health Care Administration 525 Mirror Lake Drive North, Suite 330G St. Petersburg, Florida 33701 Florida Bar No. 566365 (Electronic Mail)</p>	<p>William A. Dean, Esquire Ford, Dean & Rortundo, P.A. Turnberry Plaza, Suite 600 2875 NE 191st Street Aventura, FL 33180 Florida Bar No. 118354 (Regular U.S. Mail)</p>
<p>Honorable John G. Van Laningham Division of Administrative Hearings (Electronic Filing)</p>	