

2020 JAN -3 A 10:17

STATE OF FLORIDA  
AGENCY FOR HEALTH CARE ADMINISTRATION

STATE OF FLORIDA, AGENCY FOR  
HEALTH CARE ADMINISTRATION,

Petitioner,

vs.

SOUTH BROWARD HOSPITAL  
DISTRICT D/B/A MEMORIAL  
HOSPITAL MIRAMAR,

Respondent.

DOAH CASE NO.: 18-5318MPI  
MPI C.I. No.: 15-0232-000  
MPI CASE NO.: 2015-0002523  
PROVIDER ID NO.: 010345400  
NPI NO.: 1326021197  
LICENSE NO.: 4480

RENDITION NO.: AHCA-20-014 -S-MDO

**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 2 day of January, 201~~9~~<sup>20</sup>, in Tallahassee, Leon County, Florida.



MARY C. MAYHEW, SECRETARY  
Agency for Health Care Administration

**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.**

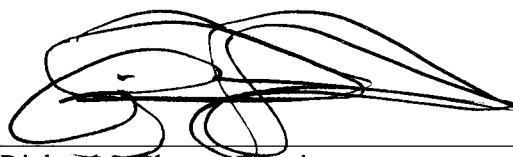
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**CERTIFICATE OF SERVICE**

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 3<sup>rd</sup> day of

January, <sup>20</sup>~~2019~~.



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