



RICK SNYDER  
GOVERNOR

STATE OF MICHIGAN  
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS  
LANSING

SHELLY EDGERTON  
DIRECTOR

August 21, 2018

Brenda Wodarski  
Platinum Living LLC  
7383 Decosta Dr. NE  
Rockford, MI 49341

RE: License #: AS410393949  
Platinum Living - Ivanrest  
6244 Ivanrest  
Byron Center, MI 49315

Dear Mrs. Wodarski:

Attached is the Addendum to the Original Licensing Study Report for the above referenced facility.

Please review the enclosed documentation for accuracy and contact me with any questions. In the event that I am not available and you need to speak to someone immediately, please contact the local office at (616) 356-0183.

Sincerely,

A handwritten signature in cursive script, appearing to read "Toya Zylstra".

Toya Zylstra, Licensing Consultant  
Bureau of Community and Health Systems  
Unit 13, 7th Floor  
350 Ottawa, N.W.  
Grand Rapids, MI 49503  
(616) 333-9702

enclosure

**MICHIGAN DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS  
BUREAU OF COMMUNITY AND HEALTH SYSTEMS  
ADDENDUM TO ORIGINAL LICENSING STUDY REPORT**

**I. IDENTIFYING INFORMATION**

**License #:** AS410393949

**Licensee Name:** Platinum Living LLC

**Licensee Address:** 7383 Decosta Dr. NE  
Rockford, MI 49341

**Licensee Telephone #:** (616) 540-3038

**Administrator/Licensee Designee:** Brenda Wodarski, Designee

**Name of Facility:** Platinum Living - Ivanrest

**Facility Address:** 6244 Ivanrest  
Byron Center, MI 49315

**Facility Telephone #:** (616) 540-3038

**Capacity:** 6

**Program Type:** MENTALLY ILL  
ALZHEIMERS  
AGED  
DEVELOPMENTALLY DISABLED

**II. Purpose of Addendum**

To add the population of developmentally disabled to the existing license’s populations served.

**III. Methodology**

08/20/2018 I received a faxed application from the licensee requesting the addition of the developmentally disabled population to the existing license.

08/20/2018 I completed a file review and verified the licensee holds the appropriate credentials and has completed the required trainings to serve the developmentally disabled population.

**IV. Description of Findings and Conclusions**

The licensee holds the appropriate credentials and has completed the required trainings to serve the developmentally disabled population. The license is currently in good standing.

**V. Recommendation**

I recommend the addition of the population, developmentally disabled, be added to the existing license.



08/21/2018

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Toya Zylstra  
Licensing Consultant

Date

Reviewed By:



08/21/2018

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Jerry Hendrick  
Area Manager

Date