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GOVERNOR

STATE OF MICHIGAN DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS LANSING

MARLON I. BROWN, DPA ACTING DIRECTOR

August 29, 2023

Christina Cotton Sojourner Aid OPCO, LLC 5364 Greenmeadow Kalamazoo, MI 49009

RE: License #: AH390378211

Sojourner Place 5364 Greenmeadow Kalamazoo, MI 49009

Dear Christina Cotton

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 (517) 284-9730.

Sincerely,

Kinveryttoox

Kimberly Horst, Licensing Staff Bureau of Community and Health Systems 611 W. Ottawa Street Lansing, MI 48909

enclosure

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

I. IDENTIFYING INFORMATION

License #:	AH390378211	
Licensee Name:	Sojourner Aid OPCO, LLC	
Licensee Address:	Ste. 3700	
	330 N. Wabash	
	Chicago, IL 60611	
Licensee Telephone #:	(312) 725-7000	
Authorized Representative:	Christina Cotton	
Name of Facility:	Sojourner Place	
Facility Address:	5364 Greenmeadow	
	Kalamazoo, MI 49009	
Facility Telephone #:	(269) 353-0416	
Capacity:	61	
Program Type:	AGED	

II. Purpose of Addendum

The facility is requesting a name change from Sojourner Place to LakeHouse Kalamazoo.

III. Methodology

On 08/28/2023, I received an updated BCAL 5055 with the new facility name.

IV. Description of Findings and Conclusions

Interview with authorized representative Christina Cotton revealed there was a change in the management company and the new company is requesting the facility name to be changed.

V. Recommendation

KimberyttooA

I recommend the facility name to be changed to LakeHouse Kalamazoo.

William January	
Kimbely Horst Licensing Staff	08/29/2023
Approved by:	
(mohed) Maore	08/29/2023
Andrea L. Moore, Manager Long-Term-Care State Licensing	Date Section