

GRETCHEN WHITMER
GOVERNOR

# STATE OF MICHIGAN DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS LANSING

MARLON I. BROWN, DPA ACTING DIRECTOR

August 29, 2023

Christina Cotton Bowman AID OPCO LLC 330 N. Wabash Chicago, IL 60611

RE: License #: AH750378305

Bowman Place 1215 N. Elm Street Three Rivers, MI 49093

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,

KinveryHood

Kimberly Horst, Licensing Staff Bureau of Community and Health Systems 612 W Ottawa 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 #:	AH750378305	
Licensee Name:	Bowman AID OPCO LLC	
Licensee Address:	Ste 3700	
	330 N. Wabash	
	Chicago, IL 60611	
	(040) 705 7040	
Licensee Telephone #:	(312) 725-7010	
Authorized Penrocentatives	Christina Cotton	
Authorized Representative:	Christina Cotton	
Name of Facility:	Bowman Place	
Facility Address:	1215 N. Elm Street	
	Three Rivers, MI 49093	
Facility Telephone #:	(269) 279-0088	
Capacity:	61	
Program Type:	AGED	

#### II. Purpose of Addendum

The facility is requesting a name change from Bowman Place to LakeHouse Three Rivers.

## III. Methodology

On 08/14/2023, while I was onsite at the facility, I learned the facility had changed their name.

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

KinveryHood

I recommend the facility name to be changed to LakeHouse Three Rivers.

08/20/2023

U	00/29/2025
Kimberly Horst Licensing Staff	Date
Approved by:	
(mohed) moore	08/29/2023
Andrea L. Moore, Manager Long-Term-Care State Licens	Date ing Section