GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

MARLON I. BROWN, DPA
DIRECTOR

June 2, 2026

Riwan Askar
Happy Home Center LLC
51125 Forster Ln
Shelby Township, MI 48316

RE: License #: AS500420188
Cappri
11233 CAPRI DRIVE
WARREN, MI 48093

Dear Mr. Askar:

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 (248) 972-9136.

Sincerely,

L. Reed

LaShonda Reed, Licensing Consultant
Bureau of Community and Health Systems
3044 W Grand Boulevard
2nd Floor Annex, Suite 2-730
Detroit, MI 48202
(586) 676-2877

enclosure

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

I. IDENTIFYING INFORMATION

License #:	AS500420188
Licensee Name:	Happy Home Center LLC
Licensee Address:	51125 Forster Ln Shelby Township, MI 48316
Licensee Telephone #:	(248) 818-2679
Administrator/Licensee Designee:	Riwan Askar
Name of Facility:	Cappri
Facility Address:	11233 CAPRI DRIVE WARREN, MI 48093
Facility Telephone #:	(313) 205-2045
Capacity:	4
Program Type:	DEVELOPMENTALLY DISABLED MENTALLY ILL

II. Purpose of Addendum

The purpose of the addendum is to reduce the capacity.

III. Methodology

06/01/2026 Contact – Telephone call from
I received a phone call from Mr. Askar. We discussed the process of modifying the capacity.

06/01/2026 Contact - Document sent
I emailed Mr. Askar with a blank copy of the modification request form.

06/01/2026 Contact – Document received
I received the modification form from Mr. Askar.

06/02/2026 Contact – Document sent
I emailed Mr. Askar.

IV. Description of Findings and Conclusions

On 06/01/2026, I received a phone call from Mr. Askar. We discussed the process of modifying the capacity. Mr. Askar said that he is pursuing a special certification license, but he has inquiry into placement for two residents that would be private paying that are requesting private bedrooms. I have informed Mr. Askar to complete a modification request.

On 06/01/2026, I received the modification form. The requested modification is to convert two currently shared bedrooms into private bedrooms to better accommodate the increasing demand for private room placements. Specifically, bedroom 1 and bedroom 2, which currently contain two beds each, will be changed to single-occupancy rooms.

V. Recommendation

I recommend the reduction of capacity to four. I recommend that bedroom one and bedroom two change from double occupancy to single-occupancy bedrooms.

06/02/2026

LaShonda Reed
Licensing Consultant

Date