STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11966431	R **01/17/2018**
NAME OF PROVIDER OR SUPPLIER **LIZI HOME CARE II, INC**	STREET ADDRESS, CITY, STATE, ZIP CODE **4521 SW 135 AVENUE** **MIAMI, FL 33175**	

SUMMARY STATEMENT OF DEFICIENCIES
(FINDINGS PRECEDED BY TAGS AND REGULATORY IDENTIFYING INFORMATION)

0000 - Initial Comments

A Standard Biennial Survey Second Revisit was conducted on January 17, 2018. Lizi Home Care II, Inc. (License #10634) did not have deficiencies identified at the time of the survey.