STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11968742	R **12/06/2018**
NAME OF PROVIDER OR SUPPLIER **NAMI HOME 2, INC**	STREET ADDRESS, CITY, STATE, ZIP CODE **11120 SW 10TH ST** **PEMBROKE PINES, FL 33025**	

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

0000 - Initial Comments

A Relicensure revisit survey was conducted by desk review on 12/06/2018 for Nami Home 2, Inc, License #12592. The previously cited deficiency was found corrected at the time of the survey.