

**AGENCY FOR HEALTH CARE
ADMINISTRATION**

PRINTED: 01/07/2019
FORM APPROVED

STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: AL11968963	(X3) DATE SURVEY COMPLETED R 12/05/2018
NAME OF PROVIDER OR SUPPLIER LITTLE HAVANA LIVING LLC	STREET ADDRESS, CITY, STATE, ZIP CODE 2028-2030 NW 5 ST MIAMI, FL 33125	

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

0000 - Initial Comments

A complaint survey (CCR# 2018011696 and #2018012653) re-visit was conducted on 12/05/18. Little Havana Living Llc with limited mental health component (License #12839) had no deficiencies identified at the time of the survey: