

[REDACTED]

March 3, 2014

Lynne Dey  
Western Regional Office/Buffalo  
New York State Department of Health  
584 Delaware Avenue  
Buffalo, NY 14202

Dear Ms. Dey,

As of January 1, 2014, [REDACTED] and [REDACTED]  
[REDACTED] merged to become [REDACTED]  
[REDACTED] dissolved and [REDACTED] was  
the surviving organization with a corporate name change.

We received [REDACTED] operating certificates, but they contained errors in relation to the name of our affiliate and health centers as well as our services. We ask that the following errors be corrected and the revised operating certificates be sent to us.

**Facility ID:**

Currently:

Change to:

Currently:

Change to:

Currently:

Change to:

[REDACTED]

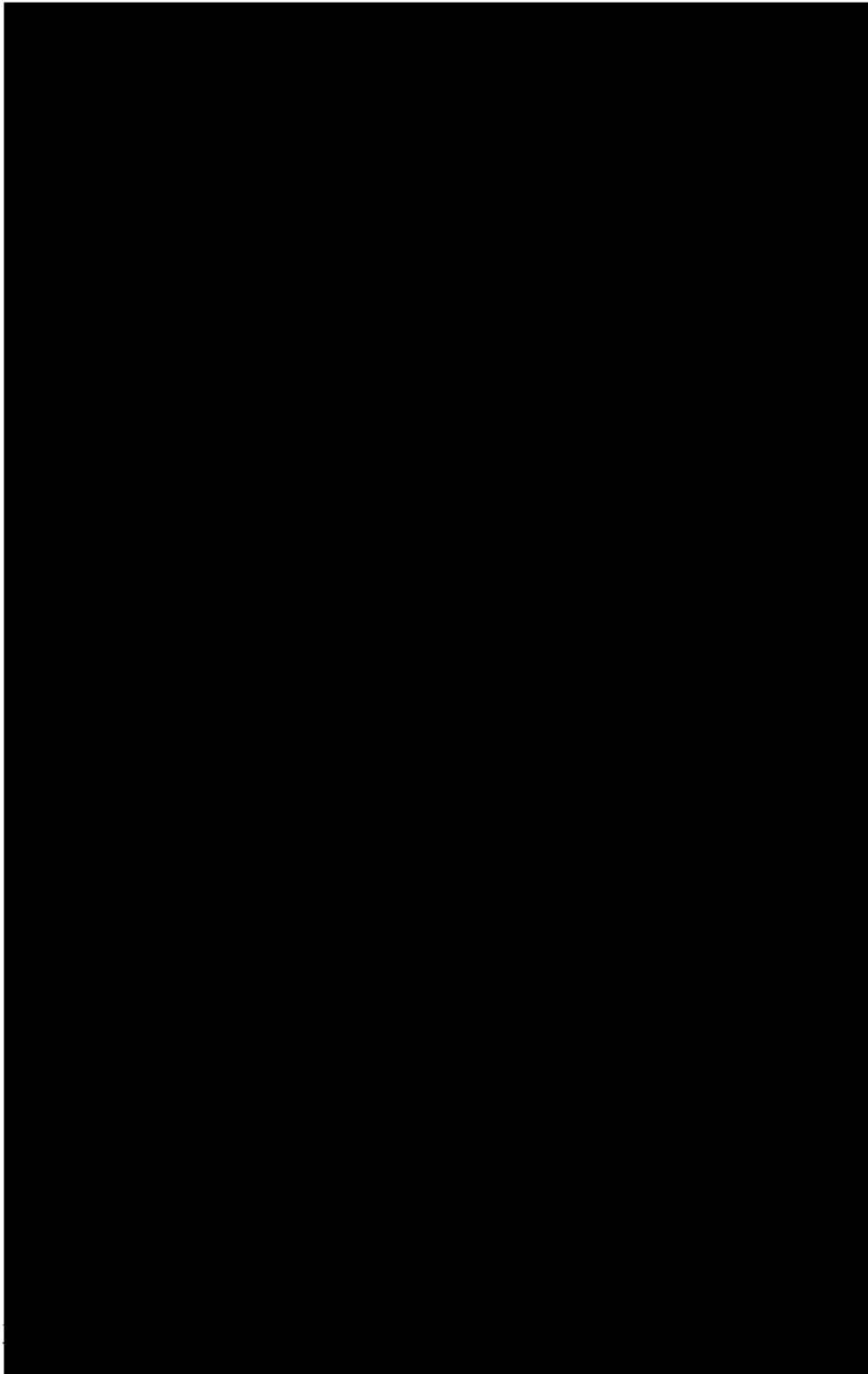
Currently:

[REDACTED]  
15 Webster Street  
North Tonawanda, NY 14120

Change to:

[REDACTED]  
15 Webster Street  
North Tonawanda, NY 14120

Currently:



Change to:

Currently:

Change to:

Currently:

Change to:

Currently:

Change to:

Currently:

Change to:

**Facility ID:**

Currently:

Change to:

**Facility ID:**

Currently:

Change to:

**Facility ID:**

Currently:

Change to:

**Facility ID:**

Currently:

Change to:

**Facility ID:**

Currently:

Change to:

**Facility ID:**

Currently:

Change to:

**Facility ID:**

Currently:

Change to:

**Facility ID:**

Currently:

Change to:

**Facility ID:**

Currently:

Change to:

**Facility ID:**

Currently:

Change to:

Please contact me with any questions. I may be reached at [REDACTED] or [REDACTED]

Thank you.

Facility Id.  
Certificate No.

2771  
1401238R

State of New York  
Department of Health  
Office of Primary Care and Health Systems Management



OPERATING CERTIFICATE  
Diagnostic and Treatment Center Extension Clinic

Effective Date: 03/03/2014  
Expiration Date: NONE



15 Webster Street  
North Tonawanda, New York 14120

Operator: [Redacted]  
Operator Class: Voluntary Not for Profit Corporation

Has been granted this Operating Certificate pursuant to Article 28 of the Public Health Law to operate an Extension Clinic at the above site for the service(s) specified.

Family Planning O/P

Primary Medical Care O/P

*Keith W. Lewis*

20140529 Deputy Director Office of Primary Care and Health Systems Management

*Howard Zucker M.D.*

Acting Commissioner

This certificate must be conspicuously displayed on the premises.