Certificate of Licensure

COPY

Issued to: BLUE MOUNTAIN ESCAPE INC.

Facility No.: 217011RH

Type: FULL

THIS CERTIFICATE AUTHORIZES BLUE MOUNTAIN ESCAPE, INC.
606 N. WEST STREET
CARLISLE, PA 17013

To Provide The Following Drug and Alcohol Activities

Recovery House (10)

Approval Date: October 09, 2026

Expiration Date: August 31, 2027

Pennsylvania
Department of Drug and Alcohol Programs

Latika Davis-Jones, PhD, MPH, MSW
Secretary of Drug and Alcohol Programs

NOTE: THIS CERTIFICATE OF APPROVAL IS ISSUED TO THE ORGANIZATION NAMED ABOVE AND IS FOR THE PREMISES AND FACILITY NAMED AND IS NOT TRANSFERRABLE.