



Certificate of Licensure

Issued to: RESTORATIVE ROOTS WILKES-BARRE, LLC

Facility No.: 407008RH

Type: FULL

THIS CERTIFICATE AUTHORIZES

334 N MAIN - RESTORATIVE ROOTS
334 N MAIN STREET
WILKES-BARRE, PA 18702

To Provide The Following Drug and Alcohol Activities

Recovery House (6)

Approval Date: December 15, 2025

Expiration Date: November 30, 2026



**Pennsylvania
Department of Drug and
Alcohol Programs**

A handwritten signature in black ink, reading "Latika Davis-Jones".

*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.