



Certificate of Licensure

Issued to: RESTORATIVE ROOTS

THIS CERTIFICATE AUTHORIZES

RESTORATIVE ROOTS
114 ORCHARD ST.
PLYMOUTH, PA 18651

Facility No.: 407002

Type: FULL

To Provide The Following Drug and Alcohol Activities
Recovery House (4)

Approval Date: July 01, 2025

Expiration Date: June 30, 2026



Pennsylvania
**Department of Drug and
Alcohol Programs**

A handwritten signature in black ink.

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.