



# Certificate of Licensure

**Issued to:** ARCHE WELLNESS, LLC

**Facility No.:** 707261

**Type:** FULL

**THIS CERTIFICATE AUTHORIZES** ARCHE WELLNESS, LLC  
237 6TH STREET  
PITTSBURGH, PA 15238

**To Provide The Following Drug and Alcohol Activities Up To The Identified Maximum Number Of Persons**  
Outpatient Drug-Free (35)

**Approval Date:** August 01, 2011

**Expiration Date:** July 31, 2012

Handwritten signature of Melanie Waters in black ink.

*Melanie Waters, RN*  
*Acting Deputy Secretary for Quality Assurance*

Handwritten signature of Eli N. Avila in black ink.

*Eli N. Avila, MD, JD, MPH, FCLM*  
*Secretary of Health*



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