INDIANA STATE DEPARTMENT OF HEALTH

WHOLESALE CERTIFICATE OF REGISTRATION

Registration Number: **R-WH-17-00004** Date: **January 10, 2017**

THIS IS TO CERTIFY THAT:

Skylar Williams **25 S Bolton Avenue , Indianapolis, IN 46219**

Owner Name Owner Address

has registered with the Indiana State Department of Health, as required by Indiana Code 16-42-1-6, to operate at:

Circle City Sonarans, LLC

Circle City Sonarans, LLC d/b/a Circle City Kombucha

Name of Establishment

1121 N Arlington Avenue, Indianapolis, Indiana **46219**

Address of Establishment Zip Code

INDIANA STATE DEPARTMENT OF HEALTH

BY: Krista Clark

Authorized Representative

SBH55-023
REV 10/2011
State Form 40699

ALL CERTIFICATES ISSUED PRIOR TO THE ABOVE DATE ARE HEREBY VOID