

**BEACON SPECIALIZED LIVING
SERVICES, INC.**

Certificate of Completion

is hereby granted to:

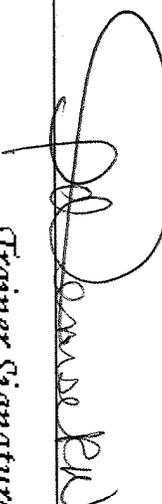
Carmelle Johnson

to certify that they have completed to satisfaction in

“DMA, Medical, Blood Borne Pathogens Training ”

Type of Training

Completion Date: 1-15-2026


Trainer Signature