

## CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 3/3/2022

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must have ADDITIONAL INSURED provisions or be endorsed.

If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).												
PRODUCER OVD Grand Rapids 2780 44TH STREET SW Wyoming MI 49519							CONTACT NAME:					
							PHONE (A/C, No, Ext): 616-454-0800 FAX (A/C, No): 616-454-7100					
							ADDRESS: certificates@ovdinsurance.com					
							INSURER(S) AFFORDING COVERAGE				NAIC#	
							INSURER A: Citizens Insurance Company				31534	
INSURED CARYCON-01							INSURER B:					
Carytown Confections Inc. 4205 Oxford Circle East						INSURER C:						
Richmond VA 23221							INSURER D:					
							INSURER E:					
							INSURER F:					
CO	VER	AGES CER	TIFIC	CATE			REVISION NUMBER:					
THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.												
INSR LTR		TYPE OF INSURANCE		SUBR WVD			POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS			
Α	X COMMERCIAL GENERAL LIABILITY Y Z21F		Z2IH949933	2IH949933		3/13/2023	EACH OCCURRENCE \$1,000		,000			
		CLAIMS-MADE X OCCUR							DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 1,000		,000	
									MED EXP (Any one person)	\$5,000		
	Х	Primary/NonContr	rimary/NonContr						PERSONAL & ADV INJURY	ERSONAL & ADV INJURY \$ 1,000,00		
	GEN	L AGGREGATE LIMIT APPLIES PER:							GENERAL AGGREGATE	\$2,000	,000	
		POLICY PRO- JECT LOC								\$2,000	,000	
OTHER:								COMBINED SINGLE LIMIT \$ 1,000,000				
Α	AUT	TOMOBILE LIABILITY	Y	Y	Z2IH949933		3/13/2022	3/13/2023	(Ea accident)	\$ 1,000	,000	
		ANY AUTO  SCHEDULED							` ' '	\$		
		AUTOS ONLY AUTOS							DDODEDTY/DAMAGE	\$		
	Х	HIRED AUTOS ONLY X NON-OWNED AUTOS ONLY							(Per accident)	\$		
										\$		
Α	X	UMBRELLA LIAB X OCCUR	Y	Y	Z2IH949933		3/13/2022	3/13/2023	EACH OCCURRENCE	\$ 1,000	,000	
		EXCESS LIAB CLAIMS-MADE							AGGREGATE	\$ 1,000	,000	
		DED X RETENTION \$ 0								\$		
Α	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY Y/N			Y	WDIH949550		3/13/2022	3/13/2023	X PER OTH- STATUTE ER			
	ANYI	PROPRIETOR/PARTNER/EXECUTIVE ICER/MEMBER EXCLUDED?	TOR/PARTNER/EXECUTIVE N/A N/A NH)						E.L. EACH ACCIDENT	\$1,000,000		
	(Man	ndatory in NH) s, describe under							E.L. DISEASE - EA EMPLOYEE	\$ 1,000,000		
	DES	CRIPTION OF OPERATIONS below							E.L. DISEASE - POLICY LIMIT	\$1,000	,000	
DES	CRIPT	FION OF OPERATIONS / LOCATIONS / VEHICL Cary St, Richmond, VA 23221	LES (A	CORD	101, Additional Remarks Schedul	le, may be	e attached if more	space is require	ed)			
30	Day	Notice of Cancellation										
CE	RTIF	FICATE HOLDER				CANCELLATION						
Kilwins Chocolates Franchise Inc. Kilwins Quality Confections Inc.							SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.					
1050 Bay View Rd						AUTHORIZED REPRESENTATIVE						
Petoskey MI							BeckyHart					