

EVIDENCE OF COMMERCIAL PROPERTY INSURANCE

DATE (MM/DD/YYYY)

AUG 21 2025 THIS EVIDENCE OF COMMERCIAL PROPERTY INSURANCE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE ADDITIONAL INTEREST NAMED BELOW. THIS EVIDENCE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND. EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS EVIDENCE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE ADDITIONAL INTEREST. PRODUCER NAME, CONTACT PERSON AND ADDRESS PHONE (A/C, No, Ext): (336) 794-2810 NAIC NO: 41840 COMPANY NAME AND ADDRESS WILSON INSURANCE SERVICES, INC. Allmerica Financial Benefit Insurance Company 511 SHEPHERD STREET, STE 102 **WINSTON SALEM NC 27103** FAX (A/C, No): (336) 794-2811 F-MAII IF MULTIPLE COMPANIES, COMPLETE SEPARATE FORM FOR EACH POLICY TYPE CODE: SUB CODE: AGENCY 4728 CUSTOMER ID #: NAMED INSURED AND ADDRESS LOAN NUMBER POLICY NUMBER HUMMINGBIRD CONFECTIONS INC. **DBA KILWINS** 308-A STRATFORD ROAD EFFECTIVE DATE EXPIRATION DATE CONTINUED UNTIL WINSTON SALEM NC 27103 **MAR 5 2025 MAR 5 2026** TERMINATED IF CHECKED THIS REPLACES PRIOR EVIDENCE DATED ADDITIONAL NAMED INSURED(S) PROPERTY INFORMATION (Use REMARKS on page 2, if more space is required) OR M BUSINESS PERSONAL PROPERTY ☐ BUILDING 308-A S. Stratford Road, Winston Salem NC 27103 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 EVIDENCE OF PROPERTY INSURANCE 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. **COVERAGE INFORMATION** X SPECIAL PERILS INSURED **BASIC** BROAD COMMERCIAL PROPERTY COVERAGE AMOUNT OF INSURANCE: \$488.500 DED: 1,000 YES NO N/A ■ BUSINESS INCOME ■ RENTAL VALUE Actual Loss Sustained; # of months: 12 If YES, LIMIT **BLANKET COVERAGE** If YES, indicate value(s) reported on property identified above: TERRORISM COVERAGE Attach Disclosure Notice / DEC IS THERE A TERRORISM-SPECIFIC EXCLUSION? IS DOMESTIC TERRORISM EXCLUDED? LIMITED FUNGUS COVERAGE If YES, LIMIT: DED: FUNGUS EXCLUSION (If "YES", specify organization's form used) REPLACEMENT COST Х AGREED VALUE X COINSURANCE If YES, % **EQUIPMENT BREAKDOWN (If Applicable)** If YES, LIMIT: DED: ORDINANCE OR LAW - Coverage for loss to undamaged portion of bldg If YES, LIMIT DED If YES, LIMIT: DED: - Demolition Costs - Incr. Cost of Construction If YES, LIMIT: DED EARTH MOVEMENT (If Applicable) Х If YES, LIMIT: DED: FLOOD (If Applicable) Х If YES, LIMIT: DED: YES NO Subject to Different Provisions: Х If YES, LIMIT: DED: WIND / HAIL INCL NAMED STORM INCL YES NO Subject to Different Provisions: If YES, LIMIT: DED: PERMISSION TO WAIVE SUBROGATION IN FAVOR OF MORTGAGE HOLDER PRIOR TO LOSS CANCELLATION SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS. ADDITIONAL INTEREST LENDER SERVICING AGENT NAME AND ADDRESS MORTGAGEE CONTRACT OF SALE LENDERS LOSS PAYABLE NAME AND ADDRESS Kilwins Chocolates Franchise Inc. & Kilwins Quality Confections Inc. 1050 Bay View Road AUTHORIZED REPRESENTATIVE Petoskey, MI 49770 Lyn Lord

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SUPPLEMENT TO EVIDENCE OF COMM PROPERTY INS # 1560 PATE 21 2025

REMARKS (Including Special Conditions) Improvements/Betterments Limit: \$185,000/ \$1,000 Deductible Small Commercial Silver Property Broadening Endorsement Applies: \$300,000 Blanket on select items 30 day Notice of Cancellation	
30 day Notice of Cancenation	