

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 03/27/2018

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 CONTACT Certificatess						
	NAME: Certifiatess					
Purmort and Martin Insurance Agency LLC	(A/C, No, Ext): (341) 300-7070 (A/C, No): (341) 303-4301					
2301 Ringling Boulevard	ADDRESS: patti@purmort.com					
Correcto	INSURER(S) AFFORDING COVERAGE NAIC #					
Sarasota				40231		
INSURED						
Ameriquest Enterprises, Inc. DBA Kilwins of Venice	INSURER C :					
	INSURER D :					
1471 Northgate Boulevard Sarasota	INSURER E :					
		FL 34234	INSURER F :			
COVERAGES CERTIFICATE NUMBER: 18/19 General Lia 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 18/19 General Lia REVISION NUMBER:						
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	ADDL	SUBR	POLICY EFF	POLICY EXP	LIMITS	
LTR TYPE OF INSURANCE	INSD		(MM/DD/YYYY)	(MM/DD/YYYY)		1,000,000
					EACH OCCURRENCE \$ DAMAGE TO RENTED PREMISES (Ea occurrence) \$	500,000
						5,000
	Y	BPG94563	02/13/2018	02/13/2019		1,000,000
						2,000,000
GEN'L AGGREGATE LIMIT APPLIES PER: POLICY PRO- JECT LOC					GENERALAGGREGATE	2,000,000
						10,000
OTHER: AUTOMOBILE LIABILITY						1,000,000
					(Ea accident) BODILY INJURY (Per person) \$.,000,000
		B1G94563	02/27/2018	02/13/2019	BODILY INJURY (Per accident) \$	
AUTOS ONLY AUTOS HIRED NON-OWNED			02/21/2010	02/10/2010	PROPERTY DAMAGE	
					(Per accident)	5,000
						2,000,000
		CUG94564	02/13/2018	02/13/2019	EACH OCCORRENCE 3	2,000,000
			01,10,2010	02/10/2010	AGGREGATE	2,000,000
WORKERS COMPENSATION					STATUTE STATUTE	
AND EMPLOYERS' LIABILITY Y/N						1,000,000
B OFFICER/MEMBER EXCLUDED?	N/A	001WC18A45058	01/20/2018	01/20/2019		1,000,000
If yes, describe under						1,000,000
DÉSCRIPTION OF OPERATIONS below					E.L. DISEASE - POLICY LIMIT \$.,000,000
DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLE	S (ACC	DRD 101, Additional Remarks Schedule,	may be attached if more s	pace is required)		
Kilwins Chocolates Franchise, Inc. & Kilwin's Quality Confections, Inc. are listed as Additional Insured on Primary and Non-Contributory Basis With Respect						
to General Liability, Auto Liability and Umbrella. Waiver of Subrogation with regards to Workers' Compensation/Employers Liability, General Liability, Auto Liability and Umbrella in Favor of Kilwins Chocholates Franchise, Inc. & Kilwin's Quality Confections Inc. Umbrella is follow form. 30 Day Notice of						
Cancellation.						
CERTIFICATE HOLDER CANCELLATION						
Kilwin's Chocolates Franchise In 1050 Bay View Road	SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.					
		AUTHORIZED REPRESENTATIVE				
Petoskey		MI 49770	Roxanne_dima			
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