



CERTIFICATE OF PROPERTY INSURANCE

DATE (MM/DD/YYYY)
11/19/2020

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.

PRODUCER: Purmort and Martin Insurance Agency LLC, 2301 Ringling Boulevard, Sarasota, FL 34237. CONTACT NAME: Pamela Zitkus, PHONE: (941) 366-7070, FAX: (941) 953-4901, E-MAIL: pamela@purmort.com, PRODUCER CUSTOMER ID: 00023390. INSURED: AMERIQUEST ENTERPRISES INC DBA KILWINS OF VENICE, 1471 NORTHGATE BLVD, SARASOTA, FL 34234-4700. INSURER(S) AFFORDING COVERAGE: INSURER A: Main Street America Protection Ins Co, NAIC #: 13026.

COVERAGES CERTIFICATE NUMBER: CP20111911552 REVISION NUMBER:

LOCATION OF PREMISES / DESCRIPTION OF PROPERTY (Attach ACORD 101, Additional Remarks Schedule, if more space is required) Loc# 00001 Bldg# 00001: 3009-53RD AVENUE EAST UNIT 2031 BRADENTON FL 34203 See Attached Overflow Pages

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.

Table with columns: INSR LTR, TYPE OF INSURANCE, POLICY NUMBER, POLICY EFFECTIVE DATE, POLICY EXPIRATION DATE, COVERED PROPERTY, LIMITS. Includes sections for PROPERTY, INLAND MARINE, and CRIME.

SPECIAL CONDITIONS / OTHER COVERAGES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required) Kilwin's Chocolate Franchise, Inc. & Kilwin's Quality Confections, Inc. Their Affiliates, Directors, Agents And Employees Are Named as Additional Insured. 45 day Notice For Material Misrepresentative or Non Renewal 10 Day Notice for Non Payment Per Florida Statute.

CERTIFICATE HOLDER

CANCELLATION

Form containing Certificate Holder information (Kilwin's Chocolates Franchise, Inc. & Kilwin's Quality Confections, Inc., Petoskey, MI 49770) and Cancellation notice (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).

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ADDITIONAL COVERAGES

Ref #	Description	Coverage Code	Form No.	Edition Date
1	00001,3009-53RD AVENUE EAST,Business Personal Pr,62,500	HURR		
Limit 1	Limit 2	Limit 3	Deductible Amount	Deductible Type
				Premium \$119.00
1	00001,3009-53RD AVENUE EAST,Spoilage,10,000	SPOIL		
Limit 1	Limit 2	Limit 3	Deductible Amount	Deductible Type
10,000				Premium \$279.00
2	00001,3009 53RD AVE E UNIT 452,Business Personal Pr,62,500	SINK		
Limit 1	Limit 2	Limit 3	Deductible Amount	Deductible Type
				Premium \$46.00
2	00001,3009 53RD AVE E UNIT 452,Business Personal Pr,62,500	WNDST		
Limit 1	Limit 2	Limit 3	Deductible Amount	Deductible Type
				Premium \$67.00
2	00001,3009 53RD AVE E UNIT 452,Business Personal Pr,62,500	SPC		
Limit 1	Limit 2	Limit 3	Deductible Amount	Deductible Type
62,500			2,500	Flat Premium
2	00001,3009 53RD AVE E UNIT 452,Business Personal Pr,62,500	HURR		
Limit 1	Limit 2	Limit 3	Deductible Amount	Deductible Type
				Premium \$140.00
2	00001,3009 53RD AVE E UNIT 452,Business Personal Pr,62,500	BPP		
Limit 1	Limit 2	Limit 3	Deductible Amount	Deductible Type
			2,500	Flat Premium \$1,072.00
2	00001,3009 53RD AVE E UNIT 452,Spoilage,10,000	SPOIL		
Limit 1	Limit 2	Limit 3	Deductible Amount	Deductible Type
				Premium \$279.00
2	00001,3009 53RD AVE E UNIT 452,BI w/ Extra Expense,12 MOS	SPC		
Limit 1	Limit 2	Limit 3	Deductible Amount	Deductible Type
			72	Hours Premium
3	00001,207 WEST VENICE AVE,Personal Property,416,900	SPC		
Limit 1	Limit 2	Limit 3	Deductible Amount	Deductible Type
416,900			2,500	Flat Premium
3	00001,207 WEST VENICE AVE,Personal Property,416,900	SINK		
Limit 1	Limit 2	Limit 3	Deductible Amount	Deductible Type
				Premium \$109.00

ADDITIONAL COVERAGES

Ref #	Description	Coverage Code	Form No.	Edition Date
3	00001,207 WEST VENICE AVE,Personal Property,416,900	HURR		
Limit 1	Limit 2	Limit 3	Deductible Amount	Deductible Type
				Premium
				\$1,103.00
Ref #	Description	Coverage Code	Form No.	Edition Date
3	00001,207 WEST VENICE AVE,Personal Property,416,900	WNDST		
Limit 1	Limit 2	Limit 3	Deductible Amount	Deductible Type
				Premium
				\$121.00
Ref #	Description	Coverage Code	Form No.	Edition Date
3	00001,207 WEST VENICE AVE,Personal Property,416,900	BPP		
Limit 1	Limit 2	Limit 3	Deductible Amount	Deductible Type
			2,500	Flat
				Premium
				\$3,029.00
Ref #	Description	Coverage Code	Form No.	Edition Date
3	00001,207 WEST VENICE AVE,Spoilage,10,000	SPC		
Limit 1	Limit 2	Limit 3	Deductible Amount	Deductible Type
				Premium
				\$279.00
Ref #	Description	Coverage Code	Form No.	Edition Date
3	00001,207 WEST VENICE AVE,BI w/ Extra Expense,12 MOS	SPC		
Limit 1	Limit 2	Limit 3	Deductible Amount	Deductible Type
			72	Hours
				Premium
Ref #	Description	Coverage Code	Form No.	Edition Date
Limit 1	Limit 2	Limit 3	Deductible Amount	Deductible Type
				Premium
Ref #	Description	Coverage Code	Form No.	Edition Date
Limit 1	Limit 2	Limit 3	Deductible Amount	Deductible Type
				Premium
Ref #	Description	Coverage Code	Form No.	Edition Date
Limit 1	Limit 2	Limit 3	Deductible Amount	Deductible Type
				Premium
Ref #	Description	Coverage Code	Form No.	Edition Date
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				Premium
Ref #	Description	Coverage Code	Form No.	Edition Date
Limit 1	Limit 2	Limit 3	Deductible Amount	Deductible Type
				Premium