

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 8/5/2020

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.											
IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must 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 line of such endorsement(c)											
certificate holder in lieu of such endorsement(s).											
	acey-Backer Inc.				NAME: ITISH WAFFEN PHONE (561)276-6055 FAX (561)265 0034						
	George Bush Boulevard			-	(A/C, No, Ext): (561)276-6055 (A/C, No): (561)265-0034						
2/2	George Bush Bourevard			_	E-MAIL ADDRESS: trish@gbifl.com INSURER(S) AFFORDING COVERAGE NAIC #						
Delray Beach FL 33444						INSURER(S) AFFORDING COVERAGE					
INSU	-	44								13026	
		-	INSURER B:Old Dominion Ins Co					40231			
	THERNMOST CHOCOLATES LLC WINS CHOCOLATES			-	INSURER C: The Travelers Indemnity Company Of Amer					25666	
	DUVAL ST			-	INSURER D :						
	-	40-6	552	-	INSURER						
				NUMBER:CL208537331	INSURER	(F:		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	ADDL INSD		POLICY NUMBER		POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS			
	X COMMERCIAL GENERAL LIABILITY								\$	1,000,000	
А	CLAIMS-MADE X OCCUR							DAMAGE TO RENTED PREMISES (Ea occurrence)	\$	500,000	
		х	Y	BPP1209J		8/6/2020	8/6/2021	MED EXP (Any one person)	\$	10,000	
								PERSONAL & ADV INJURY	\$	1,000,000	
	GEN'L AGGREGATE LIMIT APPLIES PER:							GENERAL AGGREGATE	\$	2,000,000	
	X POLICY PRO- JECT LOC							PRODUCTS - COMP/OP AGG	\$	2,000,000	
	OTHER:								\$		
	AUTOMOBILE LIABILITY							COMBINED SINGLE LIMIT (Ea accident)	\$	1,000,000	
	ANY AUTO	x				8/6/2020	8/6/2021		\$		
A	ALL OWNED SCHEDULED AUTOS		Y	BPP1209J				BODILY INJURY (Per accident)	\$		
	x HIRED AUTOS x AUTOS							PROPERTY DAMAGE (Per accident)	\$		
									\$		
	X UMBRELLA LIAB X OCCUR							EACH OCCURRENCE	\$	2,000,000	
в	EXCESS LIAB CLAIMS-MADE							AGGREGATE	\$	2,000,000	
_	DED X RETENTION \$ 10,000	х	Y	CUP1209J		8/6/2020	8/6/2021		\$		
	WORKERS COMPENSATION	N/A						X PER OTH- STATUTE ER			
	AND EMPLOYERS' LIABILITY Y / N ANY PROPRIETOR/PARTNER/EXECUTIVE							E.L. EACH ACCIDENT	\$	1,000,000	
С	OFFICER/MEMBER EXCLUDED? (Mandatory in NH)		Y UB-2L063122			8/3/2020	8/3/2021	E.L. DISEASE - EA EMPLOYEE	\$	1,000,000	
	If yes, describe under DESCRIPTION OF OPERATIONS below							E.L. DISEASE - POLICY LIMIT	\$	1,000,000	
DEC		. (800		1 Additional Remarks Onto dulk	av ba atta	had if mars	o ie rozvir"				
	CRIPTION OF OPERATIONS/LOCATIONS/VEHICLES	•			-	•	• •	lla & Auto Liability	<i>y</i> -		
	mary & Non-Contributary. Wa			_					-		
Emp	oloyers Liability. 30-day not	cice	apı	plies to General Lia	abilit	y & Auto	Liability				
CERTIFICATE HOLDER						CANCELLATION					
				SHO1				FLIER	REFORE		
Kilwin's 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 49770											
Trish Warren/TW Deticie The Detree										iren	
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CERTIFICATE OF PROPERTY INSURANCE

DATE (MM/DD/YYYY)

										00	3/05/2020		
C B	ERT ELO	IFICATE DOE: W. THIS CER	S NOT AFFIRM	A MATTER OF INFORMA ATIVELY OR NEGATIVEL' ISURANCE DOES NOT C R, AND THE CERTIFICAT	(AMEND, EX ONSTITUTE A	TEND OR ALTER ⁻ A CONTRACT BET	THE COVERAGE	٩FFG	ORDED BY THE POLI	CIES	5		
PRO	DUCE	R				CONTACT Tri NAME:	sh Warren						
Gracey-Backer Inc.						PHONE (A/C, No, Ext): (561) 276-6055 FAX (A/C, No): (561) 265-0034							
275	Geo	rge Bush Boule	vard			E-MAIL tris	sh@gbifl.com 00019098						
Delray Beach FL 33444						CUSTOMER ID:	INSURER(S) AFFORDING COVERAGE						
INSU	RED					INSURER A : Cit	INSURER A: Citizens						
Sou	therr	most Chocolate	es LLC			INSURER B :	INSURER B :						
505	Duv	al St				INSURER C :	INSURER C :						
Key West FL 33040-6552					INSURER D :	INSURER D :							
,						INSUKEK E .							
<u> </u>					· CP208505								
-				CERTIFICATE NUMBER OPERTY (Attach ACORD 101, Ac			· i.e	REI	ISION NUMBER:				
Loc TI	# 000 	001 Bldg# 0000	1: 505 Duval St K	ey West FL 330406552	ELOW HAVE BE	EN ISSUED TO THE	INSURED NAMED A						
				PERTAIN, THE INSURANCE CH POLICIES. LIMITS SHOW				UBJE	ECT TO ALL THE TERMS	i,			
INSR LTR		TYPE OF IN	SURANCE	POLICY NUMBE	R	POLICY EFFECTIVE DATE (MM/DD/YYYY)	POLICY EXPIRATION DATE (MM/DD/YYYY)		COVERED PROPERTY		LIMITS		
	\times	PROPERTY							BUILDING	\$			
	CAL	JSES OF LOSS	DEDUCTIBLES					$ \times$	PERSONAL PROPERTY	\$ 390,000			
		BASIC	BUILDING]					BUSINESS INCOME				
		BROAD							EXTRA EXPENSE	\$ \$			
	SPECIAL CONTENTS								RENTAL VALUE				
				-					BLANKET BUILDING				
А	×	WIND	3% Deduct	02999931		08/03/2020	08/03/2021	-	BLANKET PERS PROP	\$			
			570 Deddel	_					-	\$ \$			
		FLOOD		_					BLANKET BLDG & PP				
				_					-	\$			
										\$			
	INLAND MARINE		1	TYPE OF POLICY						\$			
	CAL	AUSES OF LOSS											
	NAMED PERILS			POLICY NUMBER						\$			
										\$			
		CRIME								\$			
	TYPE OF POLICY								1	\$			
									1				
		BOILER & MACH	IINERY /					\vdash		\$			
	<u> </u>	EQUIPMENT BRI						-	-	\$			
	-							-		\$			
								<u> </u>	-	\$			
										\$			
SPE	CIAL	CONDITIONS / OTH	IER COVERAGES (A	CORD 101, Additional Remarks S	Schedule, may be a	attached if more space i	s required)						
						041051115	<u></u>						
CE	< I IF	ICATE HOLDE	:K			CANCELLATI	UN						
Kilwin's Chocolates Franchise, Inc Kilwins Quality Confections Inc 1050 Bay View Rd.					THE EXPIRAT ACCORDANC	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							
Detectory Nu (2772)									ā				
	Petoskey MI 49770						Coting m. Sprand						

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