

EVIDENCE OF PROPERTY INSURANCE

Cert ID 9600 DATE (MM/DD/YYYY) 06/11/2021

THIS EVIDENCE OF 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.

1000110 INCOREN(O), ACTIONIZED REI RECENTATIVE OR I RODOCER, AND THE ADDITIONAL INTERECT.										
AGENCY Fuller Insurance LLC PO Box 1583	PHONE (A/C, No, Ex	xt): (850) 622-5283	COMPANY Centauri Specialty Ins Co 5391 Lakewood Ranch Blvd Sarasota FL 34240							
Santa Rosa Beac FL 32	2459									
FAX (A/C, No): (850) 895-3109	E-MAIL ADDRESS: ga	arrett@fuller.insure								
CODE: FL00145		SUB CODE:								
AGENCY CUSTOMER ID #: 2976										
INSURED			LOAN NUMBER		POLICY NUMBER					
Nola Conrad LLC dba Kilwins			BOP 0002257-02							
93 Dune Lakes Circle Apt B209			EFFECTIVE DATE	EXPIRATION DATE	CONTINUED UNTIL					
Santa Rosa Beach FL 32459			04/17/2021	04/17/2022	TERMINATED IF CHECKED					
			THIS REPLACES PRIOR EVIDENCE DATED:							
PROPERTY INFORMATIO	N									

LOCATION/DESCRIPTION

[1] Loc: 1 Bldg: 1 625 Grand Blvd, Suite E102, Miramar Beach, FL 32550

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	PERILS INSURED		BASIC		BROAD	Х	SPECIAL				
COVERAGE / PERILS / FORMS						AMOUNT OF INSURANCE	DEDUCTIBLE				
Loc: 1 Bldg: 1 - Val: Replace	ment Cost - Coins	: %	Buildi	ng ·	- Covera	ge I	Limit:				
Loc: 1 Bldg: 1 - Val: Replace	ment Cost - Coins	: %	Person	al :	Property	- 0	Coverage 1	Limi	.t	385,000	1,000
Loc: 1 Bldg: 1 - Spoilage										25,000	
Loc: 1 Bldg: 1 - Utility Serv	rices									10,000	
Loc: 1 Bldg: 1 - Water Back-u	p and Sump Overfl	ow								10,000	
Loc: 1 Bldg: 1 - Business Income and Extra Expense (12 months/\$300K max)						300,000					
Loc: 1 Bldg: 1 - Outdoor sign	s									5,000	
Loc: 1 Bldg: 1 - Equipment Br	eakdown									685,000	1,000
Loc: 1 Bldg: 1 - Windstorm/ha	il deductible										2%
Loc: 1 Bldg: 1 - Replacement	Cost Basis										
Loc: 1 Bldg: 1 - Special Cove	rage Form										

REMARKS (Including Special Conditions)

Kilwins Chocolates Franchise, Inc. and Kilwin's Quality Confections, Inc. are listed as Additional Insured on Primary and Non- Contributory basis with regards to General Liability, Automobile Liability, and Umbrella. Waiver of Subrogation with regards to Workers Compensation, General Liability, Automobile Liability, Umbrella in favor of Kilwins Chocolates Franchise, Inc. and Kilwin's Quality Confections, Inc.

30-day notice of cancellation and non-renewal applies

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									
NAME AND ADDRESS	х	ADDITIONAL INSURED		LENDER'S LOSS PAYABLE		LOSS PAYEE			
		MORTGAGEE							
	LOAN#								
Kilwins Chocolates Franchise, Inc. Kilwin's Quality Confections, Inc.									
1050 Bay View Road	AUTHORIZED REPRESENTATIVE								
Petoskey MI 49770				Markot Jull					

ACORD 27 (2016/03)

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