

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 09/16/2019

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).

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|--|------------------------------------|--|---------|--|--|--|--|
| PRODUCER | | CONTACT Susan Thompson | | | | | |
| Laven Insurance Agency, Inc. | | PHONE (A/C, No, Ext): (574) 291-5510 FAX (A/C, No): (574) 29 | 91-8505 | | | | |
| P. O. Box 2379 | | E-MAIL ADDRESS: suet@laveninsurance.com | | | | | |
| | | INSURER(S) AFFORDING COVERAGE | NAIC # | | | | |
| SOUTH BEND | IN 46680 | INSURER A: Society Insurance | 15261 | | | | |
| INSURED | | INSURER B: | | | | | |
| Crown Chocolates, LLC, | DBA: Kilwin's | INSURER C: | | | | | |
| 1044 East Angela Blvd. | | INSURER D : | | | | | |
| Suite 101 | | INSURER E : | | | | | |
| South Bend | IN 46617 | INSURER F: | | | | | |
| COVERAGES | CERTIFICATE NUMBER: 19-20 Kilwin's | n's fran 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. ADDL SUBR POLICY EFF (MM/DD/YYYY) TYPE OF INSURANCE POLICY NUMBER LIMITS (MM/DD/YYYY) 1,000,000 COMMERCIAL GENERAL LIABILITY EACH OCCURRENCE DAMAGE TO RENTED 300,000 CLAIMS-MADE | X OCCUR PREMISES (Ea occurrence) 5,000 MED EXP (Any one person) 1,000,000 Υ TRM586462-5 09/23/2019 09/23/2020 Α PERSONAL & ADV INJURY 2,000,000 GEN'L AGGREGATE LIMIT APPLIES PER: GENERAL AGGREGATE 2,000,000 POLICY LOC PRODUCTS - COMP/OP AGG \$ \$ 50,000 **Employment Practices** OTHER: GOMBINED SINGLE LIMIT (Ea accident) 1,000,000 AUTOMOBILE LIABILITY \$ ANY AUTO BODILY INJURY (Per person) OWNED AUTOS ONLY HIRED SCHEDULED TRM586462-5 09/23/2019 09/23/2020 BODILY INJURY (Per accident) \$ AUTOS NON-OWNED PROPERTY DAMAGE \$ AUTOS ONLY **AUTOS ONLY** \$ UMBRELLA LIAB 1,000,000 OCCUR EACH OCCURRENCE \$ **EXCESS LIAB** UXL586461-5 09/23/2019 09/23/2020 1,000,000 CLAIMS-MADE AGGREGATE DED RETENTION \$
WORKERS COMPENSATION \$ X STATUTE AND EMPLOYERS' LIABILITY 1,000,000 ANY PROPRIETOR/PARTNER/EXECUTIVE E.L. EACH ACCIDENT \$ 09/23/2020 Ν N/A Υ WC11444680-5 09/23/2019 OFFICER/MEMBER EXCLUDED? 1,000,000 (Mandatory in NH) E.L. DISEASE - EA EMPLOYEE If yes, describe under DESCRIPTION OF OPERATIONS below 1,000,000 E.L. DISEASE - POLICY LIMIT Replacement Cost \$413,662 Bus Personal Property & TRM586462-5 09/23/2019 09/23/2020 Special form \$500 deductible Improvements & Betterments

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

Location: 1044 E. Angela Blvd., Suite 101, South Bend, IN 46617

Kilwin's Chocolates Franchise, Inc. & Kilwin's Quality Convections, Inc. are listed as additional insured - Grantor of Franchise on a Primary &

Non-Contributory basis. Waiver of Subrogation with regards to General Liability, Automobile and Workers' Compensation. 30 Days notice of cancellation.

Carriers are A- rated or better

| CERTIFICATE HOLDER | | | CANCELLATION | |
|--------------------|--|----|----------------|--|
| | Kilwin's Chocolates Franchise, Inc. Kilwin's Quality Convections, Ir 1050 Bay View Road | | vections, 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. |
| | | | | AUTHORIZED REPRESENTATIVE |
| | Petosky | МІ | 49770 | Susa Thompson |