

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 7/30/2021

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 Olivier-VanDyk Insurance Agency 2780 44th Street SW Wyoming MI 49519						CONTACT NAME:					
						PHONE (A/C, No, Ext): 616-454-0800 FAX (A/C, No): 616-454-7100					
						ADDRESS: certificates@ovdinsurance.com					
						INSURER(S) AFFORDING COVERAGE					
						INSURER A: The Hartford				22357	
INSURED GULFCOA-01						INSURER B:					
Gulf Coast Confections, LLC PB Confections, LLC					INSURER C:						
4751 Main St, F113					INSURER D:						
Orange Beach AL 36561					INSURER E:						
						INSURER F:					
CO	VERAGES CER	TIFIC	CATE	NUMBER: 1527983659				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			SUBR WVD	POLICY NUMBER		POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS			
	COMMERCIAL GENERAL LIABILITY				7				\$		
	CLAIMS-MADE OCCUR							DAMAGE TO RENTED PREMISES (Ea occurrence)	\$		
								MED EXP (Any one person)	\$		
								PERSONAL & ADV INJURY	\$		
	GEN'L AGGREGATE LIMIT APPLIES PER:							GENERAL AGGREGATE	\$		
	POLICY PRO- JECT LOC							PRODUCTS - COMP/OP AGG	\$		
	OTHER:							OOMBINED ONIOLE LIMIT	\$		
	AUTOMOBILE LIABILITY							(Ea accident)	\$		
	ANY AUTO							` ' '	\$		
	OWNED AUTOS ONLY SCHEDULED AUTOS AUT							DDODEDT//DAMAGE	\$		
	HIRED AUTOS ONLY AUTOS ONLY							(Per accident)	\$		
				<u> </u>					\$		
	UMBRELLA LIAB OCCUR							EACH OCCURRENCE	\$		
	EXCESS LIAB CLAIMS-MADE								\$		
_	DED RETENTION \$ WORKERS COMPENSATION		Y	0414/504.00004		0/04/0000	0/04/0004		\$		
Α	AND EMPLOYERS' LIABILITY Y/N		Y	81WECAC00CA		8/31/2020	8/31/2021	X PER OTH-			
	ANYPROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under								\$ 1,000,000		
								E.L. DISEASE - EA EMPLOYEE			
	DÉSCRIPTION OF OPERATIONS below							E.L. DISEASE - POLICY LIMIT	\$ 1,000	,000	
	CRIPTION OF OPERATIONS / LOCATIONS / VEHICL Lation 1: 4751 Main St. Orange Beach, A			101, Additional Remarks Schedu	le, may be	e attached if more	e space is require	ed)			
	Location 1: 4751 Main St, Orange Beach, AL 36561 Location 2: 400 Quietwater Beach Rd, Pensacola Beach, FL 32561										
	APPTIFICATE HOLDER										
CEI	RTIFICATE HOLDER			CANCELLATION							
Kilwins Chocolates Franchise Inc. Kilwins Quality Confections Inc. 1050 Bay View Rd Petoskey MI 49770						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 (BECKLY HOLL)					