



CERTIFICATE OF PROPERTY INSURANCE

DATE (MM/DD/YYYY)

02/16/2018

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 Presby & Associates, Inc 9100 S Dadeland Blvd Suite # 1710 Miami FL 33156 | CONTACT NAME: Kisstin Baker PHONE (A/C, No, Ext): (305) 670-4411 FAX (A/C, No): (305) 670-0317 E-MAIL ADDRESS: PRODUCER CUSTOMER ID: 00003487 | | | | | | | | | | | | | |
|---|--|-------------------------------|--------|--|--|-------------|--|-------------|--|-------------|--|-------------|--|-------------|
| | <table border="1"> <thead> <tr> <th>INSURER(S) AFFORDING COVERAGE</th> <th>NAIC #</th> </tr> </thead> <tbody> <tr> <td>INSURER A : Safety Specialty Insurance Company</td> <td></td> </tr> <tr> <td>INSURER B :</td> <td></td> </tr> <tr> <td>INSURER C :</td> <td></td> </tr> <tr> <td>INSURER D :</td> <td></td> </tr> <tr> <td>INSURER E :</td> <td></td> </tr> <tr> <td>INSURER F :</td> <td></td> </tr> </tbody> </table> | INSURER(S) AFFORDING COVERAGE | NAIC # | INSURER A : Safety Specialty Insurance Company | | INSURER B : | | INSURER C : | | INSURER D : | | INSURER E : | | INSURER F : |
| INSURER(S) AFFORDING COVERAGE | NAIC # | | | | | | | | | | | | | |
| INSURER A : Safety Specialty Insurance Company | | | | | | | | | | | | | | |
| INSURER B : | | | | | | | | | | | | | | |
| INSURER C : | | | | | | | | | | | | | | |
| INSURER D : | | | | | | | | | | | | | | |
| INSURER E : | | | | | | | | | | | | | | |
| INSURER F : | | | | | | | | | | | | | | |
| INSURED Ed's Delight, LLC, DBA: Kilwins of Hollywood 1907 Hollywood Blvd Hollywood FL 33020 | | | | | | | | | | | | | | |

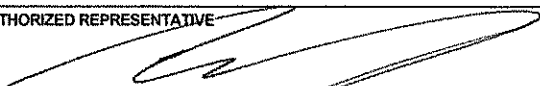
COVERAGES **CERTIFICATE NUMBER:** CP1821601482 **REVISION NUMBER:**

LOCATION OF PREMISES / DESCRIPTION OF PROPERTY (Attach ACORD 101, Additional Remarks Schedule, if more space is required)
 Loc# 00001 Bldg# 00001: 1907 Hollywood Blvd Hollywood FL 33020
 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.

| INSR LTR | TYPE OF INSURANCE | POLICY NUMBER | POLICY EFFECTIVE DATE (MM/DD/YYYY) | POLICY EXPIRATION DATE (MM/DD/YYYY) | COVERED PROPERTY | LIMITS |
|--|---|----------------|------------------------------------|-------------------------------------|---|-------------------|
| A | <input checked="" type="checkbox"/> PROPERTY | SAF000032 | 02/15/2018 | 02/15/2019 | BUILDING | \$ |
| | <input type="checkbox"/> CAUSES OF LOSS | | | | PERSONAL PROPERTY | \$ |
| | <input type="checkbox"/> DEDUCTIBLES | | | | <input checked="" type="checkbox"/> BUSINESS INCOME | \$ 120,000 @ 1/12 |
| | <input type="checkbox"/> BASIC BUILDING | | | | EXTRA EXPENSE | \$ |
| | <input type="checkbox"/> BROAD CONTENTS | | | | RENTAL VALUE | \$ |
| | <input type="checkbox"/> SPECIAL | | | | BLANKET BUILDING | \$ |
| | <input type="checkbox"/> EARTHQUAKE | | | | BLANKET PERS PROP | \$ |
| | <input checked="" type="checkbox"/> WIND 5% | | | | BLANKET BLDG & PP | \$ |
| <input type="checkbox"/> FLOOD | <input checked="" type="checkbox"/> Business Personal | \$ 205,000 | | | | |
| <input checked="" type="checkbox"/> Standard 72 | <input checked="" type="checkbox"/> Tenant | \$ 185,000 | | | | |
| <input checked="" type="checkbox"/> Special incl 1,000 | | | | | | |
| | INLAND MARINE | TYPE OF POLICY | | | | \$ |
| | CAUSES OF LOSS | POLICY NUMBER | | | | \$ |
| | NAMED PERILS | | | | | \$ |
| | CRIME | | | | | \$ |
| | TYPE OF POLICY | | | | | \$ |
| | BOILER & MACHINERY / EQUIPMENT BREAKDOWN | | | | | \$ |
| x | Food Spoilage | | | | | \$ 10,000 |

SPECIAL CONDITIONS / OTHER COVERAGES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)
 30 days notice of cancellation will be given, except 10 days notice for non payment of premium.

| | |
|---------------------------|--|
| CERTIFICATE HOLDER | 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. AUTHORIZED REPRESENTATIVE  |

© 1995-2015 ACORD CORPORATION. All rights reserved.