



PO Box 66699; Albany, NY 12206
nysif.com

[0001-000025916289][##G]

ELMUR FUDGE INC
TA KILWINS OF BABYLON
130 DEER PARK AVENUE
BABYLON NY 11702

Date: 07/31/2023
Re: WC Policy G 2591628 - 9
Policyholder: ELMUR FUDGE INC

Dear Policyholder,

Thank you for being such a valued client of NYSIF. I am contacting you in regard to your policy's limits of liability:

Part One - Workers' Compensation

There is no limit for liability. The policy provides all benefits required by the New York State Workers' Compensation Law.

Part Two - Employers' Liability

There is no limit of liability for employees subject to the New York Workers' Compensation Law. The policy provides for unlimited liability for employees subject to this law. Employers' Liability limits are applicable only in connection with employees who are not subject to the New York Workers' Compensation Law as provided by endorsement to this policy.

This letter confers no rights and does not amend, extend or alter the coverage afforded by the policy. If you have any further questions regarding the limits of liability pertaining to your NYSIF policy, please feel free to contact me using the contact information provided below.

Sincerely,

Keith Vann
Phone (212) 587-2167
Email: kvann@nysif.com

cc: FRIEDLANDER GROUP, INC.





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CERTIFICATE OF WORKERS' COMPENSATION INSURANCE

^ ^ ^ ^ ^ ^ ^ ^ 463930502
FRIEDLANDER GROUP, INC.
2500 WESTCHESTER AVE - # 400A
PURCHASE NY 10577



SCAN TO VALIDATE
AND SUBSCRIBE

POLICYHOLDER ELMUR FUDGE INC TA KILWINS OF BABYLON 130 DEER PARK AVENUE BABYLON NY 11702		CERTIFICATE HOLDER KILWINS CHOCOLATES FRANCHISE INC & KILWINS QUALITY CONFEC- TIONS INC 1050 BAY VIEW RD PETOSKEY MI 49770	
POLICY NUMBER G2591 628-9	CERTIFICATE NUMBER 528058	POLICY PERIOD 06/02/2023 TO 09/30/2023	DATE 7/28/2023

THIS IS TO CERTIFY THAT THE POLICYHOLDER NAMED ABOVE IS INSURED WITH THE NEW YORK STATE INSURANCE FUND UNDER POLICY NO. 2591 628-9, COVERING THE ENTIRE OBLIGATION OF THIS POLICYHOLDER FOR WORKERS' COMPENSATION UNDER THE NEW YORK WORKERS' COMPENSATION LAW WITH RESPECT TO ALL OPERATIONS IN THE STATE OF NEW YORK, EXCEPT AS INDICATED BELOW.

IF YOU WISH TO RECEIVE NOTIFICATIONS REGARDING SAID POLICY, INCLUDING ANY NOTIFICATION OF CANCELLATIONS, OR TO VALIDATE THIS CERTIFICATE, VISIT OUR WEBSITE AT [HTTPS://WWW.NYSIF.COM/CERT/CERTVAL.ASP](https://www.nysif.com/cert/certval.asp). THE NEW YORK STATE INSURANCE FUND IS NOT LIABLE IN THE EVENT OF FAILURE TO GIVE SUCH NOTIFICATIONS.

THE POLICY INCLUDES A WAIVER OF SUBROGATION ENDORSEMENT UNDER WHICH NYSIF AGREES TO WAIVE ITS RIGHT OF SUBROGATION TO BRING AN ACTION AGAINST THE CERTIFICATE HOLDER TO RECOVER AMOUNTS WE PAID IN WORKERS' COMPENSATION AND/OR MEDICAL BENEFITS TO OR ON BEHALF OF AN EMPLOYEE OF OUR INSURED IN THE EVENT THAT, PRIOR TO THE DATE OF THE ACCIDENT, THE CERTIFICATE HOLDER HAS ENTERED INTO A WRITTEN CONTRACT WITH OUR INSURED THAT REQUIRES THAT SUCH RIGHT OF SUBROGATION BE WAIVED.

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS NOR INSURANCE COVERAGE UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICY.

NEW YORK STATE INSURANCE FUND

DIRECTOR, INSURANCE FUND UNDERWRITING

VALIDATION NUMBER: 914908954



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CERTIFICATE OF WORKERS' COMPENSATION INSURANCE

***** 474044775
FRIEDLANDER GROUP, INC.
2500 WESTCHESTER AVE - # 400A
PURCHASE NY 10577



SCAN TO VALIDATE
AND SUBSCRIBE

POLICYHOLDER PRACTICAL MURPHY TA KILWINS OF PATCHOGUE 74 EAST MAIN STREET PATCHOGUE NY 11772		CERTIFICATE HOLDER KILWINS CHOCOLATES FRANCHISE INC & KILWINS QUALITY CONFEC- TIONS INC 1050 BAY VIEW RD PETOSKEY MI 49770	
POLICY NUMBER G2591 628-9	CERTIFICATE NUMBER 528063	POLICY PERIOD 06/02/2023 TO 09/30/2023	DATE 7/28/2023

THIS IS TO CERTIFY THAT THE POLICYHOLDER NAMED ABOVE IS INSURED WITH THE NEW YORK STATE INSURANCE FUND UNDER POLICY NO. 2591 628-9, COVERING THE ENTIRE OBLIGATION OF THIS POLICYHOLDER FOR WORKERS' COMPENSATION UNDER THE NEW YORK WORKERS' COMPENSATION LAW WITH RESPECT TO ALL OPERATIONS IN THE STATE OF NEW YORK, EXCEPT AS INDICATED BELOW.

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THIS POLICY DOES NOT COVER CLAIMS OR SUITS THAT ARISE FROM BODILY INJURY SUFFERED BY THE OFFICERS OF THE INSURED CORPORATION.

PRESIDENT
JOHN MURRAY
PRACTICAL MURPHY TA KILWINS OF
PATCHOGUE
ONE PERSON CORP

THE POLICY INCLUDES A WAIVER OF SUBROGATION ENDORSEMENT UNDER WHICH NYSIF AGREES TO WAIVE ITS RIGHT OF SUBROGATION TO BRING AN ACTION AGAINST THE CERTIFICATE HOLDER TO RECOVER AMOUNTS WE PAID IN WORKERS' COMPENSATION AND/OR MEDICAL BENEFITS TO OR ON BEHALF OF AN EMPLOYEE OF OUR INSURED IN THE EVENT THAT, PRIOR TO THE DATE OF THE ACCIDENT, THE CERTIFICATE HOLDER HAS ENTERED INTO A WRITTEN CONTRACT WITH OUR INSURED THAT REQUIRES THAT SUCH RIGHT OF SUBROGATION BE WAIVED.

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NEW YORK STATE INSURANCE FUND

DIRECTOR, INSURANCE FUND UNDERWRITING

VALIDATION NUMBER: 829007306