

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 03/12/2025

MMCRANT: If the carificate holder is an ADDITIONAL INSURED, the policy (register) an andoresminet. A statement of policy. Carificate does not carifer rights to the carificate holder in its of sector environment(). Mark Soft Soft and the policy. Carificate holder is an ADDITIONAL INSURED, the policy represented by the policy. Carificate holder is an ADDITIONAL INSURED. The policy represented by the policy. Carificate holder is an ADDITIONAL INSURED. The policy represented by the policy. Carificate holder is an ADDITIONAL INSURED. The policy represented by the policy. Carificate holder is an ADDITIONAL INSURED. The policy represented by the policy. Carificate holder is an ADDITIONAL INSURED. The policy represented by the policy. Carificate holder is an ADDITIONAL INSURED. The policy represented by the policy. Carificate holder is an ADDITIONAL INSURED. The policy represented by the policy. Carificate holder is an ADDITIONAL INSURED. The policy represented by the policy. Carificate holder is an ADDITIONAL INSURED. ADDITIONAL INSURED. The policy represented by the policy. Carificate holder is an ADDITIONAL INSURED. ADDITIONAL INSURE	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.													
May Stati Correspondences Agency, Inc. Z35 Kannab Drive Correspondences Correspondences Correspondences Correspondences Correspondences Correspondence Corresponde														
Mainy Storti Generative (B77) 266-0850 Internative (B77) 266-0850 Inte				J				CONTACT						
2023 Remain Drive Rochester, NY 14523 Recellester, NY 14523 Resulter, Ar American Zurich Insurance Company 40142 Resulter, Ar American Zurich Insurance COVERAGES CERTIFICATE NUMBER: Linking Policy Number, Ar American Zurich Insurance Resulter, Ar American Zurich Insurance Resulter, MY 1462 COVERAGES CERTIFICATE NUMBER: Linking Policy Number, Ar American Zurich Insurance Resulter, Ar American Zurich Insurance Resulter, MY 1462 COVERAGES CERTIFICATE NUMBER: Linking Policy Number, Ar American Zurich Insurance Resulter, Ar American Zurich Insur														
Roubersh NY 1423 NUMER REVISION NUMBER NUMER NUMER <th< td=""><td></td><td></td><td></td><td>gency, Inc.</td><td></td><td></td><td></td><td colspan="6"></td></th<>				gency, Inc.										
Nevere Provides PD Holings, LLC 917 Provides PD Holings, LLC 918 PD HOLING PD Holings, LLC 918 PD HOLING PD Holings, LLC 918 PD HOLING PD HOLI														
Payoba R20 Implication Implication Implication Redeeter, NY 14030 Implication Implication Implication COVERAGES CERTIFICATE NUMBER:24F10951248907 ReVISION NUMBER: This Is To CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED To THE INSURED NUMBER: Revision Number This Is To CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NUMBER: Revision Number Revision Number Implicate Number Implicate Number Revision Number Revision Number Amount Number Implicate Number Implicate Number Implicate Number Revision Number Amount Number Implicate Number Implicate Number Implicate Number Revision Number Amount Number Implicate Number Implicate Number Implicate Number Revision Number Amount Number Implicate Number Implicate Number Implicate Number Implicate Number Revision Number Amount Number Implicate Number Implicate Number Implicate Number Implicate Number Revision Number Amount Number Implicate Number Implicate Number								INSURE	40142					
Bit Parkament Builden Notestament Implement of the second								INSURE	RB:					
Rodnesker, MY 14825 Nauker 2:								INSURE	RC:					
COVERAGE								INSURE	RD:					
COVERAGES CENTIFICATE NUMBER: 24FL951248907 REVISION NUMBER: THIS IS TO CENTP' THAT THE POLICIES OF INVERTIGATOR OF BATW POLICY PERIOD DECOMMENT ON THE INSURED TO AND PORT THE THE TERMS. COVERAGES DECOMMENT SATURATION OF ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO ALL THE TERMS. EXCUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAMB. LIMITS COMMERCIAL CENERAL LABILITY MODE WIND POLICY NUMBER MODE DECOMPTON OF SUCH POLICIES. COMMERCIAL CENERAL LABILITY INTERCIDENT CONTRACT OR OTHER DOCUMENTS INTERCIDENT CONTRACT OR OTHER DOCUMENTS PREVENCE COMMERCIAL CENERAL LABILITY INTERCIDENT CONTRACT OR OTHER DOCUMENTS INTERCIDENT CONTRACT OR OTHER DOCUMENTS PREVENCE COMMERCIAL CENERAL LABILITY INTERCIDENT CONTRACT OR OTHER DOCUMENTS INTERCIDENT CONTRACT OR OTHER DOCUMENTS PREVENCE S CONTROL OF RETURNED SATURD ON ONLY ANTONO INTERCIDENT CONTRACT OR OTHER DOCUMENTS PREVENCE S COMMERCIAL CENTRE ANTONO CONTRACT OR OTHER DOCUMENTS INTERCIDENT CONTRACT OR OTHER DOCUMENTS S COMMERCIAL LABILITY INTERCIDENT CONTRACT OR OTHER DOCUMENTS S </td <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td>INSURE</td> <td>RE:</td> <td></td> <td></td> <td></td>								INSURE	RE:					
THIS IS TO CERTIFY THAT THE POLICIS OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE NOLKED ADOVE FOR THE POLICY PERIOD NUMBER ADOVE FOR THE POLICY PERIOD INDICATE NOWWHISTANDING ANY REQUIREMENT, THE AD CONDITION OF ANY CONTRACT OF OTHER DOCUMENT WITH RESPECT TO ALL THE TERMS. EXCLUSIONA ANY CONTRACTORS IN INFORMATION WITH ADDITION OF OTHER DOCUMENT WITH RESPECT TO ALL THE TERMS. EXCLUSIONA MAD CONDITIONS OF SUCH POLICY NUMBER INTERPORT TO ALL THE TERMS. EXCLUSIONA ADDITION OF ADAMS. INFORMATION ADDITION OF OPERATIONAL DEPENDENCE OF INSURANCE ADDITION OF ADDITION ADDITION ADDITIONAL ADDITION AD								INSURE	RF:					
INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT DR OTHER DOCUMENT WITH RESPECT TO WHICH THIS DESCRIBED HERRING IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAD CLAMS. EXECUSIONS AND CONDITIONS OF SUCH POLICIES LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAD CLAMS. Integrating of the policy							-							
LTR TYPE OF MSURANCE INSURANCE INSURANCE INSURANCE COMMERCIA GENERAL LABULTY CALMAS MADE OCCURRENCE \$ CLAMAS MADE OCCUR \$ CRUE CONTRECT S POLICY AUGREGATE LIMIT APPLIES PER- CONTRECT INFO EXPERIMENTS POLICY AUGREGATE LIMIT APPLIES PER- CONTRECT S POLICY AUGREGATE INSTITUTION S AUTOSO ONLY AUTOSO ONLY	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,													
Commercial central Luar Luar Luar Cocurrence is in the constraint of the cocurrence is in the cocurrence is i	INSR LTR		TYPE OF INS	URANCE	ADDL	SUBR WVD	POLICY NUMBER		POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS			
			COMMERCIAL GENE											
PERSONAL & ADVINUERY \$ GINTERAL AGGRECATE LIMITAPPLES PER- OCUPER LOC OTHER GINTERAL AGGRECATE AUTOORNEEL LIMITAPPLES PER- OTHER S AUTOORNEEL CARLITY \$ AUTOORNEEL CARLITY \$ AUTOORNEEL CARLITY \$ AUTOORNEED S OWNEED S AUTOORNEED S AUTOORNEE S AUTOORNEE S AUTOORNEE S AUTOORNEE S AUTOORNEE S <td< td=""><td></td><td></td><td>CLAIMS-MADE</td><td>OCCUR</td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></td<>			CLAIMS-MADE	OCCUR										
GEN1_AGGREGATE IMT_APPLIES PER: Imt_APPLIES S OTHER: AUTOMOBILE LABILITY S S AUTOMOBILE LABILITY SOFEDUED BOOLIV NULVY (Per pensor) S MY AUTOS SOFEDUED BOOLIV NULVY (Per pensor) S MY AUTOS NVAN MY AUTOS BOOLIV NULVY (Per pensor) S MY AUTOS NVANDAMED SOFEDUED BOOLIV NULVY (Per pensor) S MY AUTOS NVANDAMED S BOOLIV NULVY (Per pensor) S MY AUTOS NVANDAMED S BOOLIV NULVY (Per pensor) S MORES CLAIMS-MADE S S BOOLIV NULVY (Per pensor) S MORES COUPERT AUTOS ONLY NIVA WC 12-68-329-04 Of/01/2024 Of/01/2025 EL EACH ACCIDENT S MORES CUMPERS NIVA WC 12-68-329-04 Of/01/2025 Of/01/2025 EL EACH ACCIDENT S MORES CUMPERS NIVA WC 12-68-329-04 Of/01/2025 Of/01/2025 EL EACH ACCIDENT S MORES CLAIMS-MADE Location Coverage Period: 03/12/2025 Of/01/2025 Client# 70141773-TX-2 DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACCORD VI), Additional Remarks Scheduke, may be attached if more space is											MED EXP (Any one person) \$			
Policy JEEC Loc PRODUCTS - COMPIOP AGE \$ AUTOMORE LABILITY SCHEDULED SCHEDULED SCHEDULED SCHEDULED AUTOS ONLY SCHEDULED SCHEDULED SCHEDULED SCHEDULED AUTOS ONLY SCHEDULED SCHEDULED SCHEDULED SCHEDULED AUTOS ONLY AUTOS ONLY AUTOS ONLY SCHEDULED SCHEDULED AUTOS ONLY AUTOS ONLY AUTOS ONLY SCHEDULED SCHEDULED UBSCRIPTION OF OPERATIONS CLAIMS-MADE SCHEDULED SCHEDULED SCHEDULED OED RETENTION S N/A WC 12-68-329-04 06/01/2024 06/01/2025 SCHEDULED SCHEDULED Moreters COMPERATION S N/A WC 12-68-329-04 06/01/2025 06/01/2025 SCHINT SCHEDULED SCHONO Moreters COMPERATION S/ LOCATIONS below Location Coverage Period: 03/12/2025 06/01/2025 Client# 70141773-TX-2 DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORED 161, Additional Remarks Schedule, may be attached if more space is required/ Coverage is provided for of capervine, TX 76051 SCHEDULED SCHEDULED ANY OF THE ABOVE DESCRIBED POLICY INT SCHEDULED ANY OF THE ABOVE DESCRIBED POLICY INT SCHEDULED ANY OF											PERSONAL & ADV INJURY \$			
POLICYECTLOC		GEN		APPLIES PER:							GENERAL AGGREGATE \$			
AUTONOBLE LABILITY AUTONOBLE LABILITY Image: Comparison of the present of the pr			POLICY PRO- JECT	LOC							PRODUCTS - COMP/OP AGG \$			
Image: Solution of the solution			OTHER:											
OWNED HIRED AUTOS ONLY HIRED AUTOS ONLY HIRED COULD AUTOS ONLY HIRED AUTOS ON		AUT									(Ea accident)			
AUTOS ONLY AUTOS ONLY AUTOS ONLY AUTOS ONLY BOOLANAGE \$ AUTOS ONLY AUTOS ONLY AUTOS ONLY \$ \$ \$ AUTOS ONLY AUTOS ONLY \$ \$ \$ \$ DED RETENTION \$ CLAMS-MADE \$ \$ \$ AUTOS ONLY N A WC 12-68-329-04 06/01/2024 \$ <t< td=""><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></t<>														
AUTOS ONLY AUTOS ONLY AUTOS ONLY Image: Constraint of the second s			AUTOS ONLY	AUTOS										
Image: state in the second state is required. EACH OCCURRENCE s											(Per accident)			
Excess LAB CLAIMS-MADE AGENOLOGUNE AGENOLOGUNE AGENOLOGUNE AGENOLOGUNE AGENOLOGUNE AGENOLOGUNE S MORKERS COMPENSATION AND EMPORTER COMPARITIES CO											\$			
Image: Construction of the construc														
A WORKERS COMPENSATION AND EMPLOYERS' LABILITY IN ANYPROPRIETOR/PATHEREXECUTIVE OFFICE/MEMBRERE EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below Y/N N N / A WC 12-68-329-04 06/01/2024 06/01/2025 EL. EACH ACCIDENT \$ 2,000,000 EL. DISEASE - EA EMPLOYEE'S 2,000,000 EL. DISEASE - EA EMPLOYEE'S 2,000,000 DESCRIPTION OF OPERATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required) Client# 70141773-TX-2 DESCRIPTION OF OPERATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required) Alt Emp: Lizzybell Sweets LLC 338 S. Main St Grapevine, TX 76051 Alt Emp: Lizzybell Sweets LLC 338 S. Main St Grapevine, TX 76051 Certificate Holder Cancellation SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.					-									
A Antipercentification and and the regression of the reg		WOR												
A OFFICERMEMBEREXCLUDED? N N N VUC 12-60-329-04 06/01/2024 06/01/2024 06/01/2024 EL. DISEASE - EA EMPLOYEE \$ 2,000,000 EL. DISEASE - EA EMPLOYEE \$ Location Coverage Period: 03/12/2025 06/01/2025 Client# 70141773-TX-2 DESCRIPTION OF OPERATIONS / LOCATIONS / LOCATIONS / LOCATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required) Alt. Emp: Lizzybell Sweets LLC 338 S. Main St Grapevine, TX 76051 Grapevine, TX 76051 SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE Lizzybell Sweets LLC 338 S. Main St Grapevine, TX 76051 SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE AUTHORIZED REPRESENTATIVE AUTHORIZED REPRESENTATIVE AUTHORIZED REPRESENTATIVE AUTHORIZED REPRESENTATIVE	AND EMPLOYERS' LIABILITY ANYPROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED?			N / A						2 000 000				
If yes, describe under DESCRIPTION OF OPERATIONS below Image: Control of the con						WC 12-68-329-04		06/01/2024	06/01/2025					
DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required) Client# 70141773-TX-2 Coverage is provided for only those co-employees Alt. Emp: Lizzybell Sweets LLC 338 S. Main St Grapevine, TX 76051 Grapevine, TX 76051 CERTIFICATE HOLDER CANCELLATION CANCELLATION CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS. Lizzybell Sweets LLC 338 S. Main St Grapevine, TX 76051 SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.		If yes, describe under										,,		
DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required) Coverage is provided for only those co-employees of, but not subcontractors Alt. Emp: Lizzybell Sweets LLC 338 S. Main St Grapevine, TX 76051 CERTIFICATE HOLDER CANCELLATION Lizzybell Sweets LLC 338 S. Main St Grapevine, TX 76051 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 AUTHORIZED REPRESENTATIVE		DES	CRIPTION OF OPERA	TIONS below							E.L. DISEASE - POLICY LIMIT \$	2,000,000		
Coverage is provided for only those co-employees of, but not subcontractors to: Alt. Emp: Lizzybell Sweets LLC 338 S. Main St Grapevine, TX 76051 CERTIFICATE HOLDER CANCELLATION Lizzybell Sweets LLC 338 S. Main St Grapevine, TX 76051 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 Authorized Representative							Location Coverage Period	od:	03/12/2025	06/01/2025	Client# 70141773-TX-2			
Coverage is provided for only those co-employees of, but not subcontractors 338 S. Main St Grapevine, TX 76051 CERTIFICATE HOLDER CANCELLATION Lizzybell Sweets LLC 338 S. Main St Grapevine, TX 76051 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 Muthorized representative	DESC	CRIPT						le, may b	e attached if mor	e space is require	ed)			
Only those co-employees of, but not subcontractors Grapevine, TX 76051 CERTIFICATE HOLDER CANCELLATION Lizzybell Sweets LLC 338 S. Main St Grapevine, TX 76051 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 Image: Should and the state of the state			is provided for 33		sweet	S LL(
to: CERTIFICATE HOLDER CANCELLATION Lizzybell Sweets LLC 338 S. Main St Grapevine, TX 76051 AUTHORIZED REPRESENTATIVE AUTHORIZED REPRESENTATIVE AUTHORIZED REPRESENTATIVE			co-employees		51									
Lizzybell Sweets LLC 338 S. Main St Grapevine, TX 76051 AUTHORIZED REPRESENTATIVE May Stable	1 '													
Lizzybell Sweets LLC 338 S. Main St Grapevine, TX 76051 AUTHORIZED REPRESENTATIVE May Stable														
Lizzybell Sweets LLC 338 S. Main St Grapevine, TX 76051 AUTHORIZED REPRESENTATIVE May Stable														
Lizzybell Sweets LLC 338 S. Main St Grapevine, TX 76051 AUTHORIZED REPRESENTATIVE May Stable														
338 S. Main St Grapevine, TX 76051 THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS. AUTHORIZED REPRESENTATIVE Margin Station	CERTIFICATE HOLDER								CANCELLATION					
338 S. Main St Grapevine, TX 76051 THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS. AUTHORIZED REPRESENTATIVE Margin Station								eur						
ACCORDANCE WITH THE POLICY PROVISIONS. AUTHORIZED REPRESENTATIVE AUTHORIZED REPRESENTATIVE								THE	EXPIRATION	N DATE THE	EREOF, NOTICE WILL BE D			
AUTHORIZED REPRESENTATIVE May PStoli														
Mary P Stoli														
Mary Stol								AUTHORIZED REPRESENTATIVE						
								Mary Stole						
		abto accord												

The ACORD name and logo are registered marks of ACORD



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 03/11/2025

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	o the	0011		CONTA		<i>.</i>				
Mary Storti				NAME: PHONE	(877) 2	266-6850	FAX			
c/o Paychex Insurance Agency, Inc.				A/C. N E-MAIL ADDRE			(A/C, No):			
225 Kenneth Drive				ADDRE		workcomp@p				
Rochester, NY 14623							RDING COVERAGE	NAIC #		
				INSURE	RA: America	n Zurich Insu	rance Company	40142		
INSURED				INSURE	RB:					
Paychex PEO Holdings, LLC 911 Panorama Trail South				INSURE	RC:					
Rochester, NY 14625				INSURE	RD:					
				INSURE	ER E :					
				INSURE	RF:					
COVERAGES CER	TIFIC	ATE	NUMBER:24FL0951248				REVISION NUMBER:			
THIS IS TO CERTIFY THAT THE POLICIES					N ISSUED TO			ICY 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	ADDL S	SUBR WVD	POLICY NUMBER		POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS			
COMMERCIAL GENERAL LIABILITY							EACH OCCURRENCE \$			
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 \$			
							PRODUCTS - COMP/OP AGG \$			
OTHER:							COMBINED SINGLE LIMIT			
							(Ea accident)			
							BODILY INJURY (Per person) \$			
OWNED AUTOS ONLY AUTOS						BODILY INJURY (Per accident) \$				
HIRED NON-OWNED AUTOS ONLY							PROPERTY DAMAGE (Per accident)			
							\$			
UMBRELLA LIAB OCCUR							EACH OCCURRENCE \$			
EXCESS LIAB CLAIMS-MADE							AGGREGATE \$			
DED RETENTION \$							s			
WORKERS COMPENSATION							X PER OTH- STATUTE ER			
AND EMPLOYERS' LIABILITY ANYPROPRIETOR/PARTNER/EXECUTIVE							E.L. EACH ACCIDENT \$	2,000,000		
A OFFICER/MEMBEREXCLUDED? N (Mandatory in NH)			WC 12-68-329-04		06/01/2024	06/01/2025		2,000,000		
If ves, describe under							E.L. DISEASE - EA EMPLOYEE \$, ,		
DESCRIPTION OF OPERATIONS below							E.L. DISEASE - POLICY LIMIT \$	2,000,000		
			Location Coverage Perio	od:	03/10/2025	06/01/2025	Client# 70141773-TX-1			
DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required) Alt. Emp: Lizzybell Sweets LLC 323 S. 6th St Suite 120 Waco, TX 76701 to:										
CERTIFICATE HOLDER				CANCELLATION						
Lizzybell Sweets LLC 323 S. 6th St Suite 120 Waco, TX 76701			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 May 1 Stali					

The ACORD name and logo are registered marks of ACORD

© 1988-2015 ACORD CORPORATION. All rights reserved.