



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

1/21/2026

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, Inc. 37 Ottawa Ave NW, Suite 400 Grand Rapids MI 49503	CONTACT						
	NAME: PHONE (A/C, No, Ext): 616-454-0800 FAX (A/C, No): 616-454-7100						
	E-MAIL ADDRESS: certificates.sbu@ovdinsurance.com						
	INSURER(S) AFFORDING COVERAGE						
	INSURER A: The Hartford 22357						
	INSURER B: Auto Owners Insurance Company 18988						
INSURER C:							
INSURER D:							
INSURER E:							
INSURER F:							
INSURED Chocolate Girl Explosion Inc.; Ah-Ha Chocolates Fudge & Ice Cream Corp; Highly Favored Confections Inc.; Chocolate Blessings Inc.; Dark Chocolate Inc.; Chocoholics Inc.; Chocolate Legacy Inc.		CHOCGIR-01					

COVERAGES

CERTIFICATE NUMBER: 1844995379

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	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS		
A	COMMERCIAL GENERAL LIABILITY CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR <input checked="" type="checkbox"/> Primary/NonContr GEN'L AGGREGATE LIMIT APPLIES PER: POLICY <input type="checkbox"/> PRO- JECT <input type="checkbox"/> LOC OTHER:	Y	Y	81SBAAU9XH7	11/27/2025	11/27/2026	EACH OCCURRENCE \$ 2,000,000		
							DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 1,000,000		
							MED EXP (Any one person) \$ 10,000		
							PERSONAL & ADV INJURY \$ 2,000,000		
							GENERAL AGGREGATE \$ 4,000,000		
							PRODUCTS - COMP/OP AGG \$ 4,000,000		
B	AUTOMOBILE LIABILITY <input checked="" type="checkbox"/> ANY AUTO <input checked="" type="checkbox"/> OWNED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input checked="" type="checkbox"/> HIRED AUTOS ONLY <input type="checkbox"/> NON-OWNED AUTOS ONLY	Y	Y	5426556900	11/27/2025	11/27/2026	COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000		
							BODILY INJURY (Per person) \$		
							BODILY INJURY (Per accident) \$		
							PROPERTY DAMAGE (Per accident) \$		
							\$		
							\$		
A	UMBRELLA LIAB EXCESS LIAB DED <input checked="" type="checkbox"/> RETENTION \$ 10,000	X	Y	81SBAAU9XH7	11/27/2025	11/27/2026	EACH OCCURRENCE \$ 1,000,000		
							AGGREGATE \$ 1,000,000		
							\$		
A	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	Y / N N / A	N / A	81WECAW3X61	2/3/2026	2/3/2027	PER STATUTE	OTHR-	
							E.L. EACH ACCIDENT \$ 1,000,000		
							E.L. DISEASE - EA EMPLOYEE \$ 1,000,000		
							E.L. DISEASE - POLICY LIMIT \$ 1,000,000		
							\$		
							\$		

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

Location 1 - 310 S Michigan Ave, Chicago, IL 60604
 Location 2 - 5226 S Harper, Chicago, IL 60615
 Location 3 - 600 East Grand, Chicago, IL 60611
 Location 4 - 407 S Third St, Geneva, IL 60134
 Location 5 - 5224 N Clark, Chicago, IL 60640
 Location 6 - 737 North Dearborn St, Chicago, IL 60654
 Location 7 - 1724 Sherman Ave, Evanston, IL 60201

CERTIFICATE 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

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