ACORD	

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

_								_	5/	24/2022		
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 CONTACT NAME:											
OVD Grand Rapids 2780 44TH STREET SW Wyoming MI 49519						PHONE (A/C, No, Ext): 6164540800 FAX (A/C, No): 616-454-7100						
						E-MAIL ADDRESS: certificates@ovdinsurance.com						
						INSURER(S) AFFORDING COVERAGE NAM						
						INSURER A : Chubb Insurance Company						
INSURED MJSCOOP-01 MJ Scoops & Confections, LLC 32 White Heron Dr												
						INSURER B :						
						INSURER C :						
Ве	aufort SC 29907				INSURER D :							
					INSURER E :							
				INSURE	INSURER F :							
				NUMBER: 2025224510				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		SUBR WVD	POLICY NUMBER		POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMIT	s			
A	X COMMERCIAL GENERAL LIABILITY	Y	Y	D97230183		5/20/2022	5/20/2023	EACH OCCURRENCE DAMAGE TO RENTED	\$ 1,000 \$ 1,000	,		
								PREMISES (Ea occurrence)	\$ 10,00			
	X Priman/NonContr							MED EXP (Any one person) PERSONAL & ADV INJURY	\$ 1,000			
	Primary/NonContr GEN'L AGGREGATE LIMIT APPLIES PER:								\$ 2,000			
	PRO-							GENERAL AGGREGATE		,		
								PRODUCTS - COMP/OP AGG	\$2,000 \$,000		
A	OTHER:	Y	Y	D97230183		5/20/2022	5/20/2023	COMBINED SINGLE LIMIT (Ea accident)	\$ 1,000	0.000		
	ANY AUTO							BODILY INJURY (Per person)	\$			
	OWNED SCHEDULED							BODILY INJURY (Per accident)	\$			
	AUTOS ONLY AUTOS X HIRED X NON-OWNED							PROPERTY DAMAGE	\$			
								(Per accident)	\$			
A	X UMBRELLA LIAB X OCCUR	Y	Y	D97230201		5/20/2022	5/20/2023	EACH OCCURRENCE	\$ 1.000	000		
	EXCESS LIAB CLAIMS-MADE							AGGREGATE	\$ 1,000	,		
	DED RETENTION \$							AGGREGATE	\$,000		
A	WORKERS COMPENSATION		Y	71803046		5/20/2022	5/20/2023	X PER OTH-	φ			
	AND EMPLOYERS' LIABILITY ANYPROPRIETOR/PARTNER/EXECUTIVE							STATUTE ER ER EL. EACH ACCIDENT	\$ 1,000	000		
	OFFICER/MEMBER EXCLUDED?							E.L. DISEASE - EA EMPLOYEE \$1,000				
If yes, describe under DESCRIPTION OF OPERATIONS below								E.L. DISEASE - POLICY LIMIT				
	DESCRIPTION OF OPERATIONS DElow							L.L. DISEASE - FOLICI LIMIT		,000		
	CRIPTION OF OPERATIONS / LOCATIONS / VEHICI	ES (/	ACORD	101, Additional Remarks Schedu	le, may be	attached if more	space is require	ed)				
808	Bay St, Beaufort, SC 29902											
CERTIFICATE HOLDER CANCELLATION												
Kilwins Chocolates Franchise Inc. Kilwins Quality Confections Inc. 1050 Bay View Rd						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						
1	Petoskey MI				Ren	kultart.						
(Derry)timt												

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