

## CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 6/26/2023

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.

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).											
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Olivier VanDyk Insurance Agency, Inc 2780 44TH STREET SW Wyoming MI 49519						NAME: PHONE (A/C, No, Ext): 6164540800  (A/C, No			): 616-45	: 616-454-7100	
						E-MAIL ADDRESS: certificates.sbu@ovdinsurance.com					
						INSURER(S) AFFORDING COVERAGE NAIC #					
						0:1: 1 0 054				31534	
INSURED CHOCONM-01						INSURER B:					
Chocolates on Main, LLC					INSURER C:						
4390 Old River Rd					INSURER D :						
Waynesville NC 28786											
					INSURER E:						
OOVERAGED						INSURER F:					
COVERAGES CERTIFICATE NUMBER: 761858465 REVISION NUMBER:										ICV BEBIOD	
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	POLICY NUMBER		POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS			
Α	X COMMERCIAL GENERAL LIABILITY	Υ	Υ	Z2IJ072444		7/8/2023	7/8/2024	EACH OCCURRENCE	\$ 1,000	),000	
	CLAIMS-MADE X OCCUR							DAMAGE TO RENTED PREMISES (Ea occurrence)	\$ 1,000	0,000	
								MED EXP (Any one person)	\$ 10.00		
	X Primary/NonContr							PERSONAL & ADV INJURY			
	GEN'L AGGREGATE LIMIT APPLIES PER:							GENERAL AGGREGATE	\$ 2,000		
	POLICY PRO- JECT LOC							PRODUCTS - COMP/OP AG	+ ' '		
	OTHER:							THOSECTE COMMYCT THE	\$	,,,,,,	
A AUTOMOBILE LIABILITY			Υ	Z2IJ072444		7/8/2023	7/8/2024	COMBINED SINGLE LIMIT (Ea accident)	\$ 1,000	0,000	
	ANY AUTO							BODILY INJURY (Per person	) \$		
	OWNED SCHEDULED							BODILY INJURY (Per accide			
	X HIRED X NON-OWNED							PROPERTY DAMAGE	\$		
	AUTOS ONLY AUTOS ONLY							(Per accident)	\$		
Α	X UMBRELLA LIAB X OCCUR	Y	Y	Z2IJ072444		7/8/2023	7/8/2024		+		
, ,	EXOLUS COCOK		.	2210072444		77072023	11012024	AGGREGATE \$1,000			
	CEAIWS-WADE							AGGREGATE		,,000	
Α	DED   X   RETENTION \$ 0		Y	W2IJ312645		2/12/2022	2/13/2024	X PER OTH-	\$		
^	AND EMPLOYERS' LIABILITY Y / N	N/A		WZIJ312045		2/13/2023	2/13/2024				
	ANYPROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED?							E.L. EACH ACCIDENT	\$ 1,000	-	
	(Mandatory in NH)  If yes, describe under							E.L. DISEASE - EA EMPLOYEE \$ 1,00			
	DÉSCRIPTION OF OPERATIONS below							E.L. DISEASE - POLICY LIMI	T \$ 1,000	,000	
	DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required) 90 N Main St, Waynesville, NC 28786										
oo in manii ot, maynesmie, mo 20700											
CEI	RTIFICATE HOLDER		CANCELLATION								
Kilwins Chocolates Franchise Inc. Kilwins Quality Confections Inc.						SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.					
1050 Bay View Rd Petoskey MI						AUTHORIZED REPRESENTATIVE					