

EVIDENCE OF PROPERTY INSURANCE

DATE (MM/DD/YYYY)

THIS EVIDENCE OF PROPERTY INSURANCE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE ADDITIONAL INTEREST NAMED BELOW. THIS EVIDENCE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS EVIDENCE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE ADDITIONAL INTEREST.

AGENCY

PHONE (A/C, No, Ext): 918-492-8282

Company

Corbin Finley(086032R)

8282 S Memorial Dr Ste 201

Truck Insurance Exchange

| AGENCY | PHONE (A/C, No, Ext): 918-492-8282 | | COMPANY | | | | | |
|---|--|-------------|-------------------------------------|-----------------|-------------|-----------|--------------|-----------------|
| Corbin Finley(086032R) | | | | | | | | |
| 8282 S Memorial Dr Ste 201 | | | Truck Insurance Exchange | | | | | |
| | | | | | | | | |
| TULSA | | 74133-4311 | | | | | | |
| FAX (A/C, No): | ADDRESS: cfinley1@farmersagent.com | | | | | | | |
| CODE: | SUB CODE: | | | | | | | |
| AGENCY CUSTOMER ID #: | | | | | | | | |
| INSURED | | | LOAN NUMBER POLICY NUMBER | | | | | |
| CEDARWOOD SWEETS LLC | | | 607000574 | | | | | |
| 418 E 2ND ST | | | EFFECTIV | E DATE | EXPIRATION | NDATE | CONTINU | |
| | | | 07/11/ | | 07/11/2 | 026 | X TERMINA | TED IF CHECKED |
| TULSA OK 74120 | | | THIS REPLACES PRIOR EVIDENCE DATED: | | | | | |
| | | | | | | | | |
| PROPERTY INFORMATIO | N | | | | | | | |
| LOCATION/DESCRIPTION | | | | | | | | |
| 418 E 2ND ST | | | | | | | | |
| TULSA OK 74120 | | | | | | | | |
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| THE POLICIES OF INSURA | NCE LISTED BELOW HAVE BEEN IS: | SUED TO THE | E INSURED N | IAMED ABO | OVE FOR THE | POLICY P | ERIOD INDIC | ATED. |
| | REQUIREMENT, TERM OR CONDITION | | | | | | | |
| | INSURANCE MAY BE ISSUED OR MA MS, EXCLUSIONS AND CONDITIONS | | | | | | | |
| | | | | | 15.41 | DELIVICE | DOOLD BITT | ND OLANIO. |
| COVERAGE INFORMATION | | BASIC | BROAD | SPECIA | AL | | | |
| | COVERAGE / PERILS / F | ORMS | | | | AMOUNT | OF INSURANCE | DEDUCTIBLE |
| Puningga Paragnal Property | | | | | | 390,000 | | 1.000 |
| Business Personal Property Spoilage due to breakdown/contamination/power surge | | | | | | 25,000 | | 1,000 1,000 |
| Replacement Cost Basis | | | | | | 23,000 | | 1,000 |
| Agree Value with Coinsurance Suspended | | | | | | | | |
| Special Coverage Form | | | | | | | | |
| 30 Notice of Cancellation | | | | | | | | |
| Loss of Business Income & Extra Expense - Actual Loss Sustained | | | | | | 18 Month | ns | 0 |
| Wind & Hail Coverage | | | | | | 2,500 | | _ |
| 2,000 | | | | | | | | 2,000 |
| REMARKS (Including Spe | cial Conditions) | | | | | | | |
| REMARKIO (including ope | ciai Conditions) | | | | | | | |
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| CANCELLATION | | | | - TVDID AT | | | | |
| SHOULD ANY OF THE AI | BOVE DESCRIBED POLICIES BE CA | | SEFORE THE | EXPIRATI | ON DATE THE | EREOF, NO | OTICE WILL E | BE |
| SHOULD ANY OF THE AI | | | EFORE THE | EXPIRATI | ON DATE THE | EREOF, NO | OTICE WILL E | 3E |
| SHOULD ANY OF THE AIDELIVERED IN ACCORD. | | | | EXPIRATI | | EREOF, NO | | BE DSS PAYEE |
| SHOULD ANY OF THE AI DELIVERED IN ACCORD ADDITIONAL INTEREST | | | | AL INSURED | | | | |
| SHOULD ANY OF THE AIDELIVERED IN ACCORDA ADDITIONAL INTEREST NAME AND ADDRESS | ANCE WITH THE POLICY PROVISION | | ADDITIONA | AL INSURED | | | | |
| SHOULD ANY OF THE AIDELIVERED IN ACCORDADITIONAL INTEREST NAME AND ADDRESS Kilwins Choco | ANCE WITH THE POLICY PROVISION | | ADDITION/ MORTGAG | AL INSURED | | | | |
| SHOULD ANY OF THE AIDELIVERED IN ACCORDADITIONAL INTEREST NAME AND ADDRESS Kilwins Choco | lates Franchise Inc | | ADDITION/ MORTGAG | AL INSURED EE | LENDER'S LO | | | |

Petoskey, MI 49770

ACORD 27 (2016/03)

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