

EVIDENCE OF PROPERTY INSURANCE

DATE (MW/DD/YYYY) 9/15/2023

ADDITIONAL COVERAGE A	INTEREST NAMED E FFORDED BY THE P	nsurance is issued as a 1 Below. This evidence does Olicies below. This evidei D representative or produ	NOT AFFIRMATIVELY OR NCE OF INSURANCE DOES	NEGATIVELY AND NOT CONSTITUT	IEND, EXTEND O	R ALTER THE	
AGENCY	GENCY PHONE (AJC, No, Ext):			COMPANY			
COMPLETE INSURANCE SERVICE INC 1755 N. BROWN RD. STE 200 LAWRENCEVILLE GA 30043				TRAVELERS INSURANCE CO			
FAX (A/C, No):	E-MAIL						
(A/C, NO)* ADDRESS: CODE: SUB CODE:							
AGENCY CUSTOMER ID #:	THE CONTRACTOR OF THE CONTRACT	JUD GODE.					
GA CHOCOLATES AND ICE CREAM LLC PO BOX 1943			LOAN NUMBER	оминисти на подости с в усто со посторий и на 6497. Мога Май Ана Ана Андайскай от под	POLICY NUMBER BIP1X536105		
OAKWOOD GA	30566		9/20/23	EXPIRATION DATE 9/20/24	CONTINU		
			THIS REPLACES PRIOR EVI		IERMINA	TED IF CHECKED	
			THE TELEVISION CONTRACTOR	onite.			
PROPERTY INF	ORMATION		I and the second				
106 SPRING S GAINESVILLE							
NOTWITHSTANI EVIDENCE OF I	DING ANY REQUIREN PROPERTY INSURANC	TED BELOW HAVE BEEN ISSUE MENT, TERM OR CONDITION O CE MAY BE ISSUED OR MAY PE JSIONS AND CONDITIONS OF SU	F ANY CONTRACT OR OTHER	HER DOCUMENT I	WITH RESPECT TO	O WHICH THIS BED HEREIN IS	
COVERAGE INF	ORMATION						
Preimise;		COVERAGE / PERILS / FORMS		AMO	DUNT OF INSURANCE	DEDUCTIBLE	
Building Betterme Business Personal	l Property eakdown/contamination Basis	ding and Betterment improvements coverage	e is included in the BPP coverage.		\$185,000 \$205,000 . 25,000 .; REPLACEMENT	1000 1000	
30 Day Notice of C Loss of Business I Actual Loss Sustai	ncome & Extra Expense	e -			INCL 12 Months	72 hou	
DEBILDIO (I)	uding Special Condit					nija dalikusa da da galaman ja da sang ing bang panggan panggan kananan ana ana ana	
	during openiar domain	uons)					
CANCELLATION	I				en i in 1914 e Nesten (1950-1950 e 1950 e 1950 e 1960 e		
SHOULD ANY DELIVERED IN	OF THE ABOVE DI ACCORDANCE WITH	ESCRIBED POLICIES BE CAN THE POLICY PROVISIONS.	CELLED BEFORE THE EX	XPIRATION DATE	THEREOF, NOTI	CE WILL BE	
ADDITIONAL INT	TEREST						
NAME AND ADDRESS			MORTGAGEE	ADDITIONAL INSUR	ED		
			LOSS PAYEE				
Kil	lwins Chocolates F	ranahiaa las	LOAN#				
& 1							
Confections Inc.			AUTHORIZED REPRESENTATION	Æ			
	Kilwin's Quality	ianciase nic.	AUTHORIZED REPRESENTATION	<i>Ι</i> Ε			

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