

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 4/24/2024

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).

	SUBRUGATION IS WAIVED, Subject his certificate does not confer rights to						equire an endorsement. A s	tatement on	
_	DUCER				CONTACT NAME:	,-			
Olivier-VanDyk Insurance Agency					PHONE (A/C, No, Ext): 616-454-0800 (A/C, No): 616-454-7100				
2780 44th Street SW Wyoming MI 49519					E-MAIL ADDRESS: certificates.sbu@ovdinsurance.com				
Wyoning Wi 48018					INSURER(S) AFFORDING COVERAGE			NAIC#	
					INSURER A : The Hartford			22357	
INSURED THREBLI-01					INSURER B:				
Three Blind Mice, LLC Three Blind Mice Too, LLC					INSURER C:				
KTJ Sweets, LLC					INSURER D:				
3042 Landing Way					INSURER E :				
Palm Harbor FL 34684					INSURER F:				
COVERAGES CERTIFICATE NUMBER: 284887598 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 ADDL SUBR					POLICY EFF POLICY EXP (MW/DD/YYYY) LIMITS				
LTR A	X COMMERCIAL GENERAL LIABILITY	Y	WVD Y	POLICY NUMBER 81SBAAL1SYR	5/23/2024	5/23/2025			
	CLAIMS-MADE X OCCUR			0108/01210111	0/20/2024	0/20/2020	DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 1,00		
	CLAINIS-INIADE CCCOR						MED EXP (Any one person) \$10,0		
	X Primary/NonContr						PERSONAL & ADV INJURY \$ 1,00		
	GEN'L AGGREGATE LIMIT APPLIES PER:						GENERAL AGGREGATE \$2,00		
	X POLICY PRO- JECT X LOC						PRODUCTS - COMP/OP AGG \$2,00		
	OTHER:						\$	3,000	
Α	AUTOMOBILE LIABILITY	Υ	Υ	81SBAAL1SYR	5/23/2024	5/23/2025	COMBINED SINGLE LIMIT \$ 1,00	0,000	
	ANY AUTO						BODILY INJURY (Per person) \$		
	OWNED SCHEDULED AUTOS ONLY AUTOS						BODILY INJURY (Per accident) \$		
	X HIRED X NON-OWNED AUTOS ONLY						PROPERTY DAMAGE (Per accident) \$		
	No roo one:						\$		
Α	X UMBRELLA LIAB X OCCUR	Υ	Υ	81SBAAL1SYR	5/23/2024	5/23/2025	EACH OCCURRENCE \$2,00	0,000	
	EXCESS LIAB CLAIMS-MADE						AGGREGATE \$2,00	0,000	
	DED X RETENTION \$ 10,000						\$		
Α	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY		Y	81WECAL1T97	5/23/2024	5/23/2025	X PER OTH- STATUTE ER		
	ANYPROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED?						E.L. EACH ACCIDENT \$1,00	0,000	
	(Mandatory in NH) If yes, describe under	N/A					E.L. DISEASE - EA EMPLOYEE \$ 1,00	0,000	
	DESCRIPTION OF OPERATIONS below						E.L. DISEASE - POLICY LIMIT \$ 1,00	0,000	
DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required) Location 1: 10478 SW Village Center Dr, Port Saint Lucie, FL 34987 Location 2: 391 Mandalay Ave, Clearwater Beach, FL 33767 Location 3: 1561 Lakefront Dr, Sarasota, FL 34240									
CE	RTIFICATE HOLDER				CANCELLATION				
Kilwins Chocolates Franchise Inc. Kilwins Quality Confections Inc. 1050 Bay View Rd Petoskey MI					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				