

CERTIFICATE OF LIABILITY INSURANCE

| DATE | (MM/DD/YYYY) |
|------|--------------|
| | 10/0040 |

WULFINC-01

| _ | | | | | | | | - | | 7 | /3/2019 | |
|--|---|-------------------|--------------|---|--|---|--------------------------------|-----------------------------------|-----------------------------|------------------|------------------------|--|
| C B | HIS CERTIFICATE IS ISSUED AS A ERTIFICATE DOES NOT AFFIRMAT ELOW. THIS CERTIFICATE OF INS EPRESENTATIVE OR PRODUCER, AI | IVEL SUR/ | Y O | R NEGATIVELY AMEND | , EXTEN | ID OR ALT | ER THE CO | OVERAGE AFF | ORDED | BY TH | E POLICIES | |
| lf | PORTANT: If the certificate holde SUBROGATION IS WAIVED, subject is certificate does not confer rights to | ct to | the | terms and conditions of | the poli | cy, certain | policies may | | | | | |
| | | 5 110 | | | | | | | | | | |
| Risk | PRODUCER Risk Management Insurance | | | | | CONTACT Cathy Wegman PHONE (A/C, No, Ext): (239) 278-3939 FAX (A/C, No): (239) 278-4853 | | | | | | |
| ACENTRIA INSURANCE 28 Barkley Circle | | | | | E-Mall ADDRESS: cathy@riskmgmtins.com | | | | | | | |
| Fort Myers, FL 33907 | | | | | INSURER(S) AFFORDING COVERAGE | | | | | NAIC # | | |
| | | | | | | | | | | | 09525 | |
| INSU | INSURED | | | | | INSURER B : Ohio Security Insurance Co. | | | | | 24082 | |
| Wulff, Inc. dba Kilwins of Ft. Myers Beach 18260 Creekside View Dr. | | | | | INSURER C : Ohio Casualty | | | | | 24074 | | |
| | | | | | INSURER D : | | | | | | | |
| | Fort Myers, FL 33908 | | | | INSURER | E: | | | | | | |
| | | | | | INSURER | F: | | | | | | |
| | VERAGES CER | TIFI | CATI | E NUMBER: | | | | REVISION NU | MBER: | | | |
| IN C | HIS IS TO CERTIFY THAT THE POLICIE DICATED. NOTWITHSTANDING ANY R ERTIFICATE MAY BE ISSUED OR MAY (CLUSIONS AND CONDITIONS OF SUCH | EQU PER | IREM TAIN | ENT, TERM OR CONDITIO | N OF AN | IY CONTRA | CT OR OTHEF | R DOCUMENT W | ITH RESPE | ECT TO | WHICH THIS | |
| INSR LTR | TYPE OF INSURANCE | ADDL INSD | SUBF | POLICY NUMBER | | POLICY EFF MM/DD/YYYY) | POLICY EXP (MM/DD/YYYY) | | LIMIT | S | | |
| A | X COMMERCIAL GENERAL LIABILITY | | | | | | . , | EACH OCCURREN | | \$ | 1,000,000 | |
| | CLAIMS-MADE X OCCUR | Х | Х | BLW56253146 | | 6/2/2019 | 6/2/2020 | DAMAGE TO REN PREMISES (Ea oc | TED currence) | \$ | 1,000,000 | |
| | | | | | | | | MED EXP (Any one person) \$ | | \$ | 15,000 | |
| | | | | | | | | PERSONAL & ADV INJURY \$ | | \$ | 1,000,000 | |
| | GEN'L AGGREGATE LIMIT APPLIES PER: | | | | | | | GENERAL AGGREGATE \$ | | \$ | 2,000,000 | |
| | POLICY PRO- JECT LOC | | | | | | | PRODUCTS - CON | IP/OP AGG | \$ \$ | 2,000,000 | |
| В | AUTOMOBILE LIABILITY | | | | | | | COMBINED SINGL (Ea accident) | E LIMIT | \$ | 1,000,000 | |
| | ANY AUTO OWNED AUTOS ONLY AUTOS | | x | K BAS56253146 | 6/2/2019 | 6/2/2020 | , , | | \$ | | | |
| | | | | | | | BODILY INJURY (F | | \$ | | | |
| | K HIRED AUTOS ONLY X NON-OWNED AUTOS ONLY | | | | | | | PROPERTY DAMAGE (Per accident) | | \$ | | |
| | | | | | | | | | | \$ | | |
| С | X UMBRELLA LIAB X OCCUR | x | | 110050050440 | | C/2/2010 | C/0/2020 | EACH OCCURRENCE | | \$ | 1,000,000 | |
| | EXCESS LIAB CLAIMS-MADE | | X | USO56253146 | | 6/2/2019 | 6/2/2020 | AGGREGATE | | \$ | 1 000 000 | |
| | DED X RETENTION \$ 10,000 | | | | | | | PER | OTH- | \$ | 1,000,000 | |
| | WORKERS COMPENSATION AND EMPLOYERS' LIABILITY Y / N | | | | | | | PER STATUTE | ER | | | |
| ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) | | N / A | | | | | | E.L. EACH ACCIDI | | \$ | | |
| If yes, describe under | | | | | | | | E.L. DISEASE - EA EMPLOYEE \$ | | | | |
| | DÉSCRIPTION OF OPERATIONS below | | | | | | | E.L. DISEASE - PC | LICY LIMIT | \$ | | |
| | | | | | | | | | | | | |
| | | | | | | | | | | | | |
| DES | | Fe / | ACOP | D 101 Additional Romarka Sakedu | | attached if mar | e snaco is rogui | (red) | | l | | |
| Kilw | RIPTION OF OPERATIONS / LOCATIONS / VEHICI Ins Chocolates Franchise, Inc. and Kilw | vin's | Quali | ity Confections, Inc are list | ted as Ac | ditional Ins | ured on Prim | ary and Non-Co | ontributory | / basis | with regards | |
| to G Cho | eneral Liability, Auto Liability and Umb colates Franchise, Inc. and Kilwin's Qua | rella. ality (| War Confe | ver of Subrogation with regetions. Inc. 30 days notic | gards to ce of can | General Lial cellation or | bility, Auto Li non-renewal | must be provid | orella in fa ed to the l | vor of Franch | Kilwins isor on all | |
| | rages. Coverages listed are minimum | | | | | | | | | | | |
| | | | | | | | | | | | | |
| | | | | | | | | | | | | |
| | | | | | | | | | | | | |
| CE | CERTIFICATE HOLDER | | | | | CANCELLATION | | | | | | |
| Kilwins Chocolates Franchise, Inc. Kilwins Quality Confections Inc. 1050 Bay View Road | | | | | SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS. | | | | | | | |
| Petoskey, MI 49770 | | | | | AUTHORIZED REPRESENTATIVE | | | | | | | |

Earl & Rausch

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