<u>ACORD</u> , E\	/IDENCE OF PERSONA	AL PROPERTY	INSURANC	· L	TE (MM/DD/YYYY) 04/05/2019	
	THAT INSURANCE AS IDENTIFIED EGES AFFORDED UNDER THE POLIC		JED, IS IN FORCE,	, AND CONVEY	/S ALL THE	
AGENCY		COMPANY				
Risk Management Insurance	PHONE (A/C, No, Ext): (239) 278-3939	Ohio Casualty				
ACENTRIA INSURANCE	FAX (A/C, No): (239) 278-4853 E-MAIL	9450 Seward Rd				
28 Barkley Circle Fort Myers, FL 33907	ADDRESS:	Fairfield, OH 45014				
. ore myore, i 2 occor						
CODE:	SUB CODE:					
AGENCY CUSTOMER ID #: LARSWUL-	01					
INSURED		LOAN NUMBER	POLICY NUMBER			
Lauren Milett Iva die Kilodes Beseffeld Besek			BKO58371523			
Larson, Wulff, Inc dba Kilwins Deerfield Beach 18260 Creekside View Dr. Fort Myers, FL 33908		EFFECTIVE DATE	CONTINUED UNTIL 13/04/2020 TERMINATED IF CHECKED			
		03/04/2019 THIS REPLACES PRIOR EVID	00/04/2020			
PROPERTY INFORMATION LOCATION/DESCRIPTION	<u>)N</u>					
123 Ne 20Th Ave Ste 1, Deer	field Beach, FL 33441					
120 110 20 111 7110 010 1, 2001	1014 204011, 1 2 00 111					
COVERAGE INFORMATION	ON COVERAGE/PERILS/FORMS		AMOUN	NT OF INSURANCE	DEDUCTIBLE	
	OOVERAGE/I ERIES/I ORING		AWOOI	NI OI INGONANGE	DEDOCTIBLE	
	pense - 12 Month ALS - Paid at 1/6 Mthly			\$100,000		
	- Incl Tenants Improvements & Betterments			\$410,590	1,00	
Equipment Breakdown Incl Spoilage	uded			\$25,000	1,00	
Wind/Hail Excluded				\$23,000	1,00	
REMARKS (Including Spe	ecial Conditions)					
CANCELLATION						
THE POLICY IS SU	BJECT TO THE PREMIUMS, FORMS	, AND RULES IN EFFECT	FOR EACH POLIC	CY PERIOD. SH	HOULD THE	
	NATED, THE COMPANY WILL GIVE TH					
	AND WILL SEND NOTIFICATION OF					
	RDANCE WITH THE POLICY PROVISION			WOOLD /III	201 111/11	
·	NDANCE WITH THE FOLICT FROVISIO	DNS ON AS REQUIRED B	LAVV.			
NAME AND ADDRESS			450/=::::::::::::::::::::::::::::::::::::			
		MORTGAGEE	ADDITIONAL INSURED	J		
		LOSS PAYEE				
	hocolates Franchise, Inc.	LOAN#				
	uality Confections, Inc. View Road					
Petoskey,		AUTHORIZED REPRESENTATI				
	-	Earl of Rausch	s.'			
		0				

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