

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 07/10/2025

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).

	activities commented.	
PRODUCER	CONTACT NAME:	
HOP INSURANCE AGENCY INC	PHONE (A/C, No, Ext): 616-396-5728 FAX (A/C, No): 517-58	80-6739
477 CHICAGO DRIVE	E-MAIL ADDRESS:	
HOLLAND MI 49423	INSURER(S) AFFORDING COVERAGE	NAIC#
	INSURER A: FARM BUREAU INSURANCE COMPANY MI	21547
INSURED	INSURER B:	1
HEAVEN SCENTS LLC	INSURER C:	
DBA KILWINS CHOCOLATES OF HOLLAND	INSURER D:	
62 E 8TH ST	INSURER E :	
HOLLAND, MI 49423	INSURER F:	

COVERAGES CERTIFICATE NUMBER: 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 LTR	TYPE OF INSURANCE		SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
А	COMMERCIAL GENERAL LIABILITY CLAIMS-MADE X OCCUR	×			07/20/2025	07/20/2026	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 1,000,000
				BO-11337562			MED EXP (Any one person) \$ 10,000
			X				PERSONAL & ADV INJURY \$ 1,000,000
	GEN'L AGGREGATE LIMIT APPLIES PER:						GENERAL AGGREGATE \$ 2,000,000
	POLICY PRO- LOC						PRODUCTS - COMP/OP AGG \$ 2,000,000
	OTHER:						\$
	AUTOMOBILE LIABILITY						COMBINED SINGLE LIMIT (Ea accident) \$
	ANY AUTO						BODILY INJURY (Per person) \$
	OWNED SCHEDULED AUTOS						BODILY INJURY (Per accident) \$
	HIRED NON-OWNED AUTOS ONLY						PROPERTY DAMAGE (Per accident) \$
							\$
А	X UMBRELLA LIAB X OCCUR	X	x	CU-11337584	07/20/2025	07/20/2026	EACH OCCURRENCE \$ 1,000,000
	EXCESS LIAB CLAIMS-MADE						AGGREGATE \$
	DED RETENTION\$						\$
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY	¬ I I		WCC 3207438	07/20/2025	07/20/2026	X PER OTH- STATUTE ER
	ANYPROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED?		X				E.L. EACH ACCIDENT \$ 1,000,000
	(Mandatory in NH)						E.L. DISEASE - EA EMPLOYEE \$ 1,000,000
	If yes, describe under DESCRIPTION OF OPERATIONS below						E.L. DISEASE - POLICY LIMIT \$ 1,000,000
Α	HIRED & NON-OWNED AUTO LIABILITY	x	х	BO-11337562	07/20/2025	07/20/2026	\$1,000,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

KILWINS CHOCOLATES FRANCHISE, INC AND KILWINS QUALITY CONFECTIONS INC ARE LISTED AS ADDITIONAL INSURED ON PRIMARY AND NON-CONTRIBUTORY BASIS WITH REGARDS TO GENERAL LIABILITY, AUTOMOTIVE LIABILITY AND UMBRELLA. WAIVER OF SUBROGATION WITH RECORDS TO WORKERS COMP/EMPLOYEES LIABILITY, GENERAL LIABILITY, UMREALLA, IN FAVOR OF KILWINS CHOCOLATES FRANCHISE ADND KILWINS QUALITY CONFECTIONS INC.

CERTIFICATE HOLDER	CANCELLATION
KILWINS CHOCOLATES FRANCHISE INC KILWINS QUALITY CONFECTIONS INC	SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.
	Opnathan Hop r.f.

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