ACORD	

EVIDENCE OF PROPERTY INSURANCE

DATE (MM/DD/YYYY) 11/25/2020

THIS EVIDENCE OF PROPERTY INSURANCE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE ADDITIONAL INTEREST NAMED BELOW. THIS EVIDENCE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS EVIDENCE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE ADDITIONAL INTEREST.							
AGENCY Van Wyk Risk Solutions 150 Ottawa Ave NW Suite 1000 Grand Rapids, MI 49503	PHONE (A/C, No, Ext): 616-942-5070	сомраму Citizens Insurance Company of America					
FAX (A/C, No): 616-942-8199	E-MAIL ADDRESS: dennisl@vanwykcorp.com						
CODE:	SUB CODE:						
AGENCY CUSTOMER ID #: 7083							
INSURED Gojoco, Inc. St. Charles Kilwins 300 South Main				POLICY NUMBER ECP 0459017			
Saint Charles	Saint Charles, MO 63301 EFFECTIVE DATE 11/18/2020		EXPIRATION D 11/18/202				
	THIS REPLACES PRIOR EVID	ENCE DATED:					
PROPERTY INFORMATION							
1 300 S Main St Saint Charles, MO 633013435							
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 EVIDENCE OF PROPERTY INSURANCE 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.							
COVERAGE INFORMATIO	ON PERILS INSURED BASIC	BROAD 🗸 SPECIA					
	COVERAGE / PERILS / FORMS			AMOUNT OF INSURA	NCE DEDUCTIBLE		
Personal Property / Replacement Cost / Special Form (incl theft) / Coinsurance Waived Spoilage due to break down/contamination/power outage				15	,818 500.00 ,000 500.00 uded 500.00		
Systems Breakdown Included 500. Business Income & Extra Expense ALS 0 Ho							
REMARKS (Including Spo Includes 30 Day notice of ca	ecial Conditions) ancellation other than non-payment of premium						
CANCELLATION							
SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.							
ADDITIONAL INTEREST				T			
NAME AND ADDRESS		ADDITIONAL INSURED MORTGAGEE	LENDER'S LOS	S PAYABLE	LOSS PAYEE		
1050 Bay V		LOAN #					
Petoskey, N	11 49770	AUTHORIZED REPRESENTATI	/E		11. 1		
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