

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 10/13/2022

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 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).

certificate holder in lieu of such endorsement(s).												
PRO	DUCER				CONTACT John Backer							
Gra	cey-Backer Inc.				PHONE (A/C, No, Ext): (561) 276-6055 FAX (A/C, No): (561) 265-0034							
275	George Bush Boulevard				E-MAIL ADDRESS: john@gbifl.com							
					INSURER(S) AFFORDING COVERAGE					NAIC #		
	ray Beach FL 334	144			INSURERA: Mainstreet America Protection Ins. Co.					13026		
INSU					INSURER B: Old Dominion Ins Co					40231		
	CANDY CO LLC				INSURER C: Associated Industries Ins Co					23140		
11117 ROCKPORT ST						INSURER D :						
			INSURER E :									
		336-8810			INSURER F:							
				NUMBER: CL22101348								
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. INST INDICY FEF POLICY FEF POLICY FEF												
INSR LTR	TYPE OF INSURANCE		WVD	POLICY NUMBER		POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS				
	X COMMERCIAL GENERAL LIABILITY							EACH OCCURRENCE \$		1,000,000		
A	CLAIMS-MADE X OCCUR					11/28/2022	11/28/2023	DAMAGE TO RENTED PREMISES (Ea occurrence) \$		500,000		
		х		BPG2266L				MED EXP (Any one person) \$		10,000		
								PERSONAL & ADV INJURY \$		1,000,000		
	GEN'L AGGREGATE LIMIT APPLIES PER:							GENERAL AGGREGATE \$		2,000,000		
	X POLICY PRO- JECT LOC							PRODUCTS - COMP/OP AGG \$		2,000,000		
	OTHER:	<u> </u>						\$				
A	AUTOMOBILE LIABILITY							COMBINED SINGLE LIMIT (Ea accident) \$		1,000,000		
	ANY AUTO ALL OWNED SCHEDULED							BODILY INJURY (Per person) \$				
	AUTOS AUTOS NON-OWNED	X	х	BPG2266L		11/28/2022	11/28/2023	BODILY INJURY (Per accident) \$ PROPERTY DAMAGE 6				
	HIRED AUTOS X AUTOS							(Per accident)				
	W JIMPOTI ALIAD W	-						\$				
	X UMBRELLA LIAB X OCCUR EXCESS LIAB CLAIMS MADE							EACH OCCURRENCE \$		1,000,000		
В		x		grann ccr				AGGREGATE \$		1,000,000		
	DED X RETENTION \$ 0 WORKERS COMPENSATION	<u> </u>		CUG2266L		11/28/2022	11/28/2023	X PER OTH-	The Res of St.			
	AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE	N/A				10/25/2022	10/25/2023					
C	OFFICER/MEMBER EXCLUDED? (Mandatory in NH)			AWC1186963				E.L. EACH ACCIDENT \$		1,000,000		
-	If yes, describe under DESCRIPTION OF OPERATIONS below			M. C. I 100 7 0 3		10/25/2022	10/25/2025	E.L. DISEASE - EA EMPLOYEE \$		1,000,000		
	DESCRIPTION OF OPERATIONS BRIDW							E.L. DISEASE - POLICY LIMIT \$		1,000,000		
DESC	RIPTION OF OPERATIONS / LOCATIONS / VEHICLE	S (ACC	ORD 10	1, Additional Remarks Schedule, m	ay be atta	ched if more spac	e is required)					
Cer	tificate holder is Additiona bility; Waiver of Subrogatio	l In	sure	ed - Primary & Non-C	Contri	butory re	General 1	Liability, Auto				
Wor	kers Compensation/Employers	n ar Liab	ilit	y; 30-day notice of	ticy, Ecano	ellation/	non-renewa	al - except Workers				
Com	pensation 122 NORTH PARK	AVEN	Œ,	WINTER PARK, FL, 32	2789	•						
CEF	RTIFICATE HOLDER			1	CANCELLATION							
					6110	III D ANV OF T	HE VBOVE DE	SCRIPED DOLLOIDS DE CANOS		DEFORE		
	Kilwins Chocolate Franci	nise	. In	c				SCRIBED POLICIES BE CANCE , NOTICE WILL BE DELIVERED		DEFUKE		
	Kilwins Quality Confect:			_	ACCORDANCE WITH THE POLICY PROVISIONS.							
1050 Bay View Road												
	Petoskey, MI 49770				AUTHORIZED REPRESENTATIVE							

John Backer, CPA/AB