

## **EVIDENCE OF PROPERTY INSURANCE**

DATE (MM/DD/YYYY) 07/10/2017

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.

ISSUING INSURER(S	), AUTHORIZE	D REPRESE	ENTATIVE OR PRODU			IAL INTEREST.	1			
AGENCY	(A/C, No, Ext):				OMPANY					
Teddy J Byrd Agency				١,	IATIONIA/IDE NALIT	LIAL FIDE INOL	ID A NO	- 00MDANN/		
97 E MAIN ST					IATIONWIDE MUT	UAL FIRE INSU	JRANC	E COMPANY		
PO BOX 1031										
COATS		NC	27521-1031							
FAX (A/C, No):	E-MAIL ADDRESS:									
CODE:		SUB CODE:								
AGENCY CUSTOMER ID #: 86280										
INSURED				LC	OAN NUMBER			POLICY NUMBER		
MAG'S DULCE LLC								ACP - BPFF - 22 - 7 - 4218106		
DBA KILWIN'S					EFFECTIVE DATE	EXPIRATIO	N DATE	CONTINU		
2004 BOULDERSTONE WAY					12/05/2016	12/05/2	2017	X TERMINA	TED IF CHECKED	
CARY		NC	27519-8408	TH.	IIS REPLACES PRIOR E	VIDENCE DATED:				
PROPERTY INFORMA	TION									
LOCATION/DESCRIPTION	IION									
- HIGH END FUDGE AN										
THE POLICIES OF IN NOTWITHSTANDING A EVIDENCE OF PROPE SUBJECT TO ALL THE	ANY REQUIRE RTY INSURAN	MENT, TER ICE MAY BE	M OR CONDITION C ISSUED OR MAY PI	OF ANY ERTAIN,	CONTRACT OR ( THE INSURANCE	OTHER DOCUM AFFORDED BY	MENT V	VITH RESPECT TO POLICIES DESCR	TO WHICH THIS IBED HEREIN IS	
COVERAGE INFORMA	ATION									
		COVE	RAGE / PERILS / FORMS				АМО	UNT OF INSURANCE	DEDUCTIBLE	
Extra Expense / Special Fo	rm / PB0002							12 Months ALS		
Building / 100 % / Actual C		ial Form / PB0	002					\$ 145,000	\$ 1,000	
Personal Property / 100 % / Actual Cash Value / Special Form / PB0002							ì	\$ 154,400	\$ 1,000	
Business Income / Special							1	12 Months ALS	<b>V</b> 1,000	
Buomese meeme / epecial	7 01117 1 20002							12 Months / LC		
REMARKS (Including	Special Cond	itions)								
CANCELLATION										
SHOULD ANY OF TH				LED BEF	ORE THE EXPIRA	TION DATE TH	IEREO	F, NOTICE WILL	BE DELIVERED	
IN ACCORDANCE WI	TH THE POLIC	Y PROVISI	ONS.							
ADDITIONAL INTERES	<u>ST</u>			1						
NAME AND ADDRESS					MORTGAGEE	ADDITIONA	L INSURI	ΞD		
					LOSS PAYEE					
				LOA	AN #					
KILWINS CHOCOATE FRANC	CHISE, INC									
1050 BAY VIEW ROAD				ALIT	HORIZED REPRESENT	ATIVE				
		N.AI	40770							
PETOSKY		MI	49770		du Durd					

ACORD 27 (2009/12)

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	DED BY THE POLICIES E ), AUTHORIZED REPRES				E A CONTRACT I	BETWEEN THE		
AGENCY	PHONE (A/C, No, Ext):		COMPANY					
Teddy J Byrd Agency 97 E MAIN ST	1,435,135, 235,		NATIONWIDE MUTUAL FIRE INSURANCE COMPANY					
PO BOX 1031								
COATS	NC F-MAII	27521-1031						
FAX (A/C, No):	E-MAIL ADDRESS:							
CODE:	SUB CODE:							
CUSTOMER ID #: 86280 INSURED			LOAN NUMBER		POLICY NUMBER			
MAG'S DULCE LLC			LOAN NOMBER		ACP - BPFF - 22 - 7 - 4218106			
DBA KILWIN'S			EFFECTIVE DATE	EXPIRATION DATI	CONTINUE			
2004 BOULDERSTONE WAY			12/05/2016	12/05/2017	X   TERMINAT	FED IF CHECKED		
CARY	NC	27519-8408	THIS REPLACES PRIOR EV	IDENCE DATED:				
PROPERTY INFORMA	TION							
LOCATION/DESCRIPTION	ERSTONE WAY, CARY,	NC 27519 - 8408						
- HIGH END FUDGE AN	ID ICE CREAM STORE							
NOTWITHSTANDING A EVIDENCE OF PROPE SUBJECT TO ALL THE	SURANCE LISTED BELO ANY REQUIREMENT, TEF ERTY INSURANCE MAY B TERMS, EXCLUSIONS AN	RM OR CONDITION OF E ISSUED OR MAY PERT	ANY CONTRACT OR OF FAIN, THE INSURANCE A	THER DOCUMENT AFFORDED BY THE	WITH RESPECT T POLICIES DESCR	TO WHICH THIS IBED HEREIN IS		
COVERAGE INFORMA	ATION							
	COVE	ERAGE / PERILS / FORMS		AM	OUNT OF INSURANCE	DEDUCTIBLE		
Extra Expense / Special Fo					12 Months ALS			
Business Income / Special		2000			12 Months ALS			
	ash Value / Special Form / PB0				\$ 145,000	\$ 1,000		
Personal Property / 100 %	/ Actual Cash Value / Special I	F0IIII / FB0002			\$ 154,400	\$ 1,000		
REMARKS (Including	Special Conditions)			<u>'</u>				
CANCELLATION								
	E ABOVE DESCRIBED PO TH THE POLICY PROVIS		BEFORE THE EXPIRA	TION DATE THERE	OF, NOTICE WILL I	BE DELIVERED		
ADDITIONAL INTERES	ST							
NAME AND ADDRESS	-		MORTGAGEE	ADDITIONAL INSU	RED			
			LOSS PAYEE					
KILWINS CHOCOATE FRANC	CHISE, INC							
1050 BAY VIEW ROAD			AUTHORIZED REPRESENTA	TIVE				
PETOSKY	MI	49770						
I LIUSKI	IVII	17110	Teddy Byrd					

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