

## CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 3/28/2022

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.

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).												
	DUCER	Jule	Cert	incate noider in ned or st	CONTACT							
Olivier-VanDyk Insurance Agency						NAME: PHONE (A/C, No, Ext): 616-454-0800  FAX (A/C, No, Ext): 616-454-0800					7400	
2780 44th Street SW						F SAAU					-7100	
Wyoming MI 49519						ADDRESS: Certificates@ovdinsurance.com						
						INSURER(S) AFFORDING COVERAGE					NAIC #	
OWEFORN						INSURER A: Citizens Insurance Company					31534	
INSURED SWEECEN-01 Sweet Cents Investments, LLC						INSURER B: The Hartford					22357	
9903 Gulf Coast Main St, Ste 160						INSURER C:						
Fort Myers FL 33913						INSURER D:						
						INSURER E :						
					INSURER F:							
				NUMBER: 1952020745	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   POLICY EFF   POLICY EXP												
LTR	TYPE OF INSURANCE	INSD	WVD	POLICY NUMBER		(MM/DD/YYYY)	(MM/DD/YYYY)		LIMITS			
В	X COMMERCIAL GENERAL LIABILITY  CLAIMS-MADE X OCCUR	Υ	Y	81SBAAH0G7D		7/19/2021	7/19/2022	EACH OCCURRENCE DAMAGE TO RENTED PREMISES (Ea occurre		\$ 1,000, \$ 1,000,		
								MED EXP (Any one per		\$ 10.000		
	X Primary/NonContr							PERSONAL & ADV INJ	,	\$ 1,000,		
	GEN'L AGGREGATE LIMIT APPLIES PER:						GENERAL AGGREGATE \$2,0					
	POLICY PRO- LOC							PRODUCTS - COMP/C		\$ 2,000,		
	OTHER:									\$		
В	AUTOMOBILE LIABILITY	Υ	Υ	81SBAAH0G7D		7/19/2021	7/19/2022	COMBINED SINGLE LI (Ea accident)	IMIT	\$ 1,000,	000	
	ANY AUTO							BODILY INJURY (Per p	person)	\$		
	OWNED SCHEDULED AUTOS							BODILY INJURY (Per a	accident)	\$		
	X HIRED X NON-OWNED AUTOS ONLY							PROPERTY DAMAGE (Per accident)		\$		
										\$		
В	X UMBRELLA LIAB X OCCUR	Υ	Υ	81SBAAH0G7D		7/19/2021	7/19/2022	EACH OCCURRENCE		\$ 1,000,	000	
	EXCESS LIAB CLAIMS-MADE	SS LIAB CLAIMS-MADE								\$ 1,000,000		
	DED X RETENTION \$ 10,000									\$		
Α	WORKERS COMPENSATION		Υ	W2ID566498		4/13/2022	4/13/2023	X PER STATUTE	OTH- ER			
	AND EMPLOYERS' LIABILITY ANYPROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH)							· · · · · ·		\$ 1,000,	000	
								E.L. DISEASE - EA EMPLOYEE				
	If yes, describe under DESCRIPTION OF OPERATIONS below							E.L. DISEASE - POLIC		\$ 1,000,		
	BECOKII HON OF OF EXAMONO BEIOW							E.E. BIOLINOE TOLIO	Limit	ψ .,σσσ,		
DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)												
9903 Gulf Coast Main St, Ste 160, Fort Myers, FL 33913 30 day notice of cancellation												
CERTIFICATE HOLDER						CANCELLATION						
Kilwins Chocolates Franchise Inc. Kilwins Quality Confections Inc. 1050 Bay View Rd Petoskey MI 49770						SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.						
						AUTHORIZED REPRESENTATIVE						
						(BeckyHart						