

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 12/21/2021

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 noticy(les) must have ADDITIONAL INSURED provisions or be endorsed

If	SUBROGATION IS WAIVED, subject is certificate does not confer rights to	to t	ne te	rms and conditions of th	e polic	y, certain po	olicies may r		orsement	. A sta	atement on	
PRODUCER						CONTACT NAME:						
Olivier-VanDyk Insurance Agency						PHONE (A/C, No, Ext): 616-454-0800 (A/C, No): 616-454-7100						
2780 44th Street SW Wyoming MI 49519						(A/C, No, Ext): 010-434-0000 (A/C, No): 010-434-7100 E-MAIL ADDRESS: certificates@ovdinsurance.com						
						INSURER(S) AFFORDING COVERAGE					NAIC#	
INSURED SUNSSWE-01						INSURER A: The Hartford					22357	
Sunshine Sweets, LLC						INSURER B:						
20 Congress St						INSURER C:						
Portsmouth NH 03801						INSURER D:						
						INSURER E :						
					INSURER F:							
				NUMBER: 1455336803								
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												
INSR LTR	TYPE OF INSURANCE	INSD	WVD	POLICY NUMBER		POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)		LIMIT	s		
Α	X COMMERCIAL GENERAL LIABILITY	Y	Υ	81SBAIK5238		1/12/2022	1/12/2023	EACH OCCURREN	CE	\$ 1,000	,000	
	CLAIMS-MADE X OCCUR							DAMAGE TO RENTED			,000	
								MED EXP (Any one	person)	\$ 10,00	0	
	X Primary/NonContr							PERSONAL & ADV	INJURY	\$ 1,000	,000	
	GEN'L AGGREGATE LIMIT APPLIES PER:							GENERAL AGGRE	GATE	\$2,000	,000	
	POLICY PRO- JECT LOC							PRODUCTS - COM	P/OP AGG	\$2,000	,000	
	OTHER:							\$		\$		
Α	AUTOMOBILE LIABILITY	Υ	Υ	81SBAIK5238		1/12/2022	1/12/2023	COMBINED SINGLI (Ea accident)	E LIMIT	\$1,000	,000	
	ANY AUTO							BODILY INJURY (Per person) \$		\$		
	OWNED SCHEDULED AUTOS ONLY AUTOS							BODILY INJURY (P	er accident)	\$		
	X HIRED X NON-OWNED AUTOS ONLY							PROPERTY DAMAG	GE	\$		
	AUTOS ONET							(i or accident)		\$		
Α	X UMBRELLA LIAB X OCCUR	Υ	Υ	81SBAIK5238		1/12/2022	1/12/2023	EACH OCCURREN	CE	\$ 1,000	.000	
	EXCESS LIAB CLAIMS-MADE									\$ 1,000		
	DED X RETENTION\$ 10,000									\$		
	WORKERS COMPENSATION							PER STATUTE	OTH- ER	*		
	AND EMPLOYERS' LIABILITY ANYPROPRIETOR/PARTNER/EXECUTIVE	N/A						E.L. EACH ACCIDE		\$		
	OFFICER/MEMBER EXCLUDED? (Mandatory in NH)							E.L. DISEASE - EA EMPLOYEE				
	If yes, describe under DESCRIPTION OF OPERATIONS below							E.L. DISEASE - POLICY LIMIT		\$		
	DESCRIPTION OF GENATIONS BEIOW							E.E. DIOLAGE - I O	LIOT LIMIT	Ψ		
DESCRIPTION OF OPERATIONS/LOCATIONS/VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required) 20 Congress St, Portsmouth, NH 03801 A 30 day notice of cancellation applies.												
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						
						Reckulart						