

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 02/04/2019

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 have ADDITIONAL INSURED provisions or 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 come rights to the certificate holder in fied of such endorsement(s).							
PRODUCER		CONTACT Stacy Bennett CIC, CISR NAME:					
Coastal Plains Insurance of the Lowcou	ntry	PHONE (A/C, No, Ext): (843) 706-3006	FAX (A/C, No): (843) 706-3007				
PO Box 1079		E-MAIL ADDRESS: stacy@cpilowcountry.com					
		INSURER(S) AFFORDING COVERAGE	NAIC #				
Bluffton	SC 29910	INSURER A: Sentinel Insurance Company Ltd	11000				
INSURED		INSURER B: Hartford Accident Indemnity Co	22357				
Underwood Aquisitions,	LLC	INSURER C:					
3187 Linksland Rd		INSURER D:					
		INSURER E:					
Mount Pleasant	SC 29466	INSURER F:					
COVERAGES	CERTIFICATE NUMBER: 18-19	REVISION NUME	RFR:				

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 LTR	TYPE OF INSURANCE	ADDL INSD	SUBR	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP	LIMITS
A	COMMERCIAL GENERAL LIABILITY CLAIMS-MADE COCUR GEN'L AGGREGATE LIMIT APPLIES PER: POLICY PRODUCT LOC OTHER:	Y	WVD	22SBMUL2566	11/19/2018	11/19/2019	EACH OCCURRENCE \$ 2,000,000 DAMAGE TO RENTED
А	AUTOMOBILE LIABILITY ANY AUTO OWNED AUTOS ONLY HIRED AUTOS ONLY AUTOS ONLY AUTOS ONLY AUTOS ONLY	Υ		22SBMUL2566	11/19/2018	11/19/2019	COMBINED SINGLE LIMIT (Ea accident) BODILY INJURY (Per person) BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$
Α	✓ UMBRELLA LIAB OCCUR EXCESS LIAB CLAIMS-MADE DED ✓ RETENTION \$ 0	Y		22SBMUL2566	11/19/2018	11/19/2019	### STATES \$ 1,000,000
В	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	N/A		22WECCT1693	05/01/2018	05/01/2019	PER OTH- STATUTE ER E.L. EACH ACCIDENT \$ 1,000,000 E.L. DISEASE - EA EMPLOYEE \$ 1,000,000 E.L. DISEASE - POLICY LIMIT \$ 1,000,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

Kilwins Chocolate Franchise, Inc. and Kilwins Quality Confections Inc. are listed as Additional Insured on Primary and Non-Contributory basis with regards to General Liability, Automobile Liability and Umbrella. Waiver of Subrogation with regards to Workers Compensation, General Liability, Automobile Liability, Umbrella in favor of Kilwins Chocolate Franchise Inc and Kilwins Quality Confections, Inc. Umbrella is follow form. 30 days notice of cancellation.

CERTIFICATE HOLDER				CANCELLATION		
	Kilwins Chocolates Franchise, Inc. Kilwins Quality Confections Inc. 1050 Bay View Road		ctions Inc.	SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.		
	1030 Bay view Road			AUTHORIZED REPRESENTATIVE		
	Petoskey	MI 4	49770	Want A Moment		